2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 23, 2007 8:00 am Secretary of State **DOCUMENT # P99000098956** 04-23-2007 90099 009 ***150.00 RINEHART RIDGE III, INC. Principal Place of Business Mailing Address 3600 VINELAND ROAD 3600 VINELAND ROAD **SUITE 1010 SUITE 1010** ORLANDO, FL 32811 ORLANDO, FL 32811 CR2E034 (11/05) 03192007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3619044 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BARKER, EARL M JR 334 E DUVAL ST JACKSONVILLE, FL 32202 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PSTD** TITLE WEBB, DANIEL E NAME STREET ADDRESS 3600 VIEWLAND RD STE 101 ORLANDO, FL 32811 CITY-ST-ZIP TITLE NAME BARKER, EARL M JR STREET ADDRESS 334 E. DUVAL STREET JACKSONVILLE, FL CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with at the information contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered by the corporation of the corporation or the receiver or trustee empowered by the corporation of the receiver or trustee empowered by the corporation of the receiver or trustee empowered by the corporation of the receiver or trustee empowered by the corporation of the receiver or trustee empowered by the corporation of the receiver or trustee empowered by the corporation of the receiver or trustee empowered by the corporation of the receiver or trustee empowered by the corporation of the receiver of trustee empowered by the corporation of the receiver or trustee empowered by the corporation of the receiver of the corporation of the receiver or trustee empowered by the corporation of the receiver of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the re

SIGNATURE: _

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> Barl M. Barker, Jr. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 1 9 2007

FILED