

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A29705**

1. Entity Name
CMP DEVELOPMENT III, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 28 AM 10:16

Principal Place of Business
**433 PLAZA REAL, STE. #335
BOCA RATON FL 33432
US**

Mailing Address
**433 PLAZA REAL, STE. #335
BOCA RATON FL 33432-3945
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0176079	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GRAGG, K. LAWRENCE
WHITE & CASE
200 SOUTH BISCAYNE BLVD., STE. 4900
MIAMI FL 33131-2352**

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. \$1,300,000.00	10. Amount of Capital Contributions in FLORIDA to date. 0.00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	K77201 CROCKER MIZNER PARK III, INC. 433 PLAZA REAL, STE. #335 BOCA RATON FL 33432	STREET ADDRESS	100003165311--5
		CITY - ST - ZIP	-03/10/00--01077--005 ***141.25 ***141.25
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS	rf 3/8/00
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		CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **Robert E. Onisko**
VP & G.P.
Date: **2/14/00** Daytime Phone #: **(561) 395-9666**