2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR)					APPRUVE: AND	
DOCUMENT # A9900000169 1. Entity Name					FILED	
ERMC III LIMITED PARTNERSHIP					02 APR 29 PM 3: 42	
Principal Pla	Mailing Address			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
5312 RINGGOLD ROAD. SUITE 201 5312 RINGGOLD ROAD. SU			ITE 201		MELANICO	
VINITATIO	CHATTANOOGA TN 37412			l (BACK) (BIS (BIS 18)) SON: BON: BON: BON: BON: BON: BON: BOX:		
Principal Place of Business 3. Mailing Address			<u> </u>			
OSuite, Apt. #, etc.			wy			
City & State City & Sta		Suite 300	e		DUE BY MAY 1, 2002 4. FEI Number Applied For	
	nooga TN	Chattanooga	Country		62-1788277 Not Applicable	
3 ^{ZIP} 421	6. Name and Address of Current F	37421	USA		5. Certificate of Status Desired	
				7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301-2525						
			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						
9. Capital Contributions as Shown on record. \$1,000.00 In FLORIDA to date.						
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	NUSSELL SECURITY CU. III, INC.		STREET ADDRESS	6148 Lee Huy Suite 300		
STREET ADDRESS CITY-ST-ZIP	5312 RINGGOLD ROAD, SUITE 20 CHATTANOOGA TN 37412	1	CITY-ST-ZIP	Chat	Chattanooga, TN 37421	
DOCUMENT # NAME			STREET ADDRESS		, (II	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP			
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STREET ADDRESS			City-St-Zip		-05/13/02111151015 ****141.25 ****141.25	
DOCUMENT A.: NAME		,	STREET ADDRESS			
STREET ADDRESS		:	CITY-ST-ZIP			
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NAME STREET ADDRESS						
DOCUMENT #			CITY-ST-ZIP			
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CITY-ST-ZIP		* N. W	CITY-ST-ZIP	TRANSMIN TO A AND AND AND AND AND AND AND AND AND A	and the state of t	
14. I hereby certify that the information supplied with this filling 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 Russell Security Co. III, Inc.						
SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER DOS HOLD Date Dayling Phone #						

CR2E003 (9/01)