


**2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006**

**FILED
May 01, 2006 08:00 AM
Secretary of State**

DOCUMENT # B0400000261		
1. Entity Name PANTHER INVESTMENT ASSOCIATES III, LP		

Principal Place of Business 155 S. MIAMI AVENUE, PH 2-A MIAMI, FL 33130	Mailing Address 155 S. MIAMI AVENUE, PH 2-A MIAMI, FL 33130
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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04212006 Chg-LP CR2E003 (11/05)

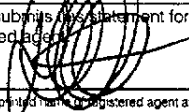
City & State	City & State	4. FEI Number 65-0800333	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SIRLIN, DANIEL 155 S. MIAMI AVENUE, PH 2-A MIAMI, FL 33130
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7. Name and Address of New Registered Agent	
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE 5/1/06

**FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00**

**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 #	SIRLIN, DANIEL	STREET ADDRESS	
NAME	155 S. MIAMI AVENUE, PH 2-A	CITY - ST - ZIP	
STREET ADDRESS	MIAMI, FL 33130		
CITY - ST - ZIP			
DOCUMENT #	Krinsky, KRINSKY, JEFF	STREET ADDRESS	U00000554129
NAME	155 S. MIAMI AVENUE, PH 2-A	CITY - ST - ZIP	05/15/06-80075-018 500.00
STREET ADDRESS	MIAMI, FL 33130		
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
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NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			

STAPLE CHECK HERE

14. 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 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:  DATE 5-1-06 DAYTIME PHONE # 305-374-7015

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER