FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

FHED

1999	X02077	retary of State OF CORPORATIONS	99 APR -2		
1. Name of Limited Partnership	1a. DOCUMENT # A30023			SE CASE LARRE (A SELACE) Lua tor het finl der fine fine finl der der klein der der der der	
CSF VINTAGE PROPERTIES	III, LTD.		1 2041211 1004 11111 10111 1011	8 11888 1181 81887 81887 81883 81887 81887 81887 81887 13881	
Mailing Address 1601 JEFFERSON AVENUE MIAMI BEACH FL 33139	Principal Office Address 1601 JEFFERSON AVENUE MIAMI BEACH FL 33139		3. Date Formed or Registered 05/03/1990 3a. Date of Lest Report 03/23/1998	5a. Capital Contributions as Shown on record \$400,010.00 5b. Amount of Capital Contributions in FL ORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date 4 400, 810 - 86	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-0356580	Applied For Not Applicable	
City & State Zip Country	City & State Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
County			8. Make check payable to Dept. of	State (See reverse side for fee information)	
1601 JEFFERSON AVENUE MIAMI FL 33139 10a. Pursuant to the provisions of sections 620,1051 ar for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment)	registered agent, or both, in the State of F s of section 620,192, Florida Statules.	Suile, Apt #, etc City med limited partnership lorida Such change wa	- 日4/12 東米米東5。 organized or registered under the laws of th is authorized by its general partner(s). I here DATE	try accept the appointment of registered	
A GENERAL PARTNER THAT	T BE REGISTERED A	ND ACTIVE		ER BUSINESS ENTITY	
11. Name(s) of General Partner(s) VINTAGE PROPERTIES GROUP, IN	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1601 JEFFERSON AVE.		b. City, State & Zip Code MIAMI BEACH FL 31. 99	11c. Registration/ Document Number L69079	
Note: General partners MAY NOT 12. I do hereby certify that the information supplied with the from any liability of non-compliance with Section 119.	is filing is voluntarily furnished and does n	ol qualify for the exempti	ion stated in Section 119 07(3)(k), Florida Sta	alules I release the Division of Corporations	
is true and accurate and that my signature shall have execute this report as required by chapter 621 Florid	the same legal effects as if made under o				

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number 30.5 539 1/129