

FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION  
AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 APR -3 PM 2: 22

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #  
A09937

NATIONAL PROPERTY INVESTORS III (LTD.)

Mailing Address

5665 NORTHSIDE DRIVE. N.W.  
SUITE 370  
ATLANTA GA 30328

Principal Office Address

5665 NORTHSIDE DRIVE. N.W.  
SUITE 370  
ATLANTA GA 30328

3. Date Formed or Registered

01/14/1981

5a. Capital Contributions as  
Shown on record.

\$24,024,500.00

3a. Date of Last Report

10/31/1995

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

4. State or Country of Formation

CA

2. Mailing Address

P.O. Box 1089  
Suite, Apt. #, etc.

2a. Principal Office Address

ONE TOSIGNIA FINANCIAL AVE  
Suite, Apt. #, etc.

City & State

GREENVILLE SC  
Zip 29602 Country

City & State

GREENVILLE, S.C.  
Zip 29601 Country

6. FEI Number

13-2974428

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

10. If changed, new Registered Agent/Office

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

Name

FF \$541.25

Street Address (P.O. Box Number Is Not Acceptable)

(new \$)

Suite, Apt. #, etc.

City

4/13 FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/  
Document Number

NPI EQUITY INVESTMENTS

5665 NORTHSIDE DR., N

ATLANTA GA

S12448

000002134320--7  
-04/04/97--01116--002  
\*\*\*\*269.33 \*\*\*\*269.33

000002134320--7  
-04/04/97--01116--003  
\*\*\*\*271.92 \*\*\*\*271.92

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE

DATE

3/12/97

Typed or Printed Name of General Partner Signing Form

Valley M. Buschler, Pres

Daytime Telephone Number

864-239-1000

0004531

CR2E003 (11/96)