

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0019432 AB

DOCUMENT # **A19863**

1. Entity Name  
**PUBLIC STORAGE EURO FUND III, LTD.**



**FILED**

03 JAN 29 PM 1:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
701 WESTERN AVENUE, SUITE 200  
GLENDALE CA 91201

Mailing Address  
701 WESTERN AVENUE, SUITE 200  
GLENDALE CA 91201



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**DUE BY MAY 1, 2003**

City & State

City & State

4. FEI Number **95-3603119**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NRAI SERVICES, INC.  
526 EAST PARK AVENUE  
TALLAHASSEE FL 32301**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. **\$4,118,500.00**

10. Amount of Capital Contributions in FLORIDA to date. **4,118,500.00**

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**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 # **F96000002628**  
NAME **HFAC TWO, INC.**  
STREET ADDRESS **701 WESTERN AVENUE, SUITE 200**  
CITY-ST-ZIP **GLENDALE CA 91201**

STREET ADDRESS

CITY-ST-ZIP

**200011194192**  
**01/29/03--01094--008 \*\*526.50**

DOCUMENT # **HUGHES, B. WAYNE**  
NAME **HUGHES, B. WAYNE**  
STREET ADDRESS **701 WESTERN AVENUE, SUITE 200**  
CITY-ST-ZIP **GLENDALE CA 91201**

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

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: **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**1-21-03**  
Date

**(818) 244-8080**  
Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE