

2001 UNIFORM BUSINESS REPORT (UBR)

0002281 AF

DOCUMENT # A25223 ✓

1. Entity Name
SCHRIMSHER LAND FUND III, LTD. ✓

Principal Place of Business
600 EAST COLONIAL DRIVE ✓
SUITE 100
ORLANDO FL 32803

Mailing Address
600 EAST COLONIAL DRIVE
SUITE 100 ✓
ORLANDO FL 32803

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

FILED

01 FEB 27 AM 9:43

SECRETARY OF STATE

FLORIDA

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2835355** ✓ Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SCHRIMSHER, J. STEVEN ✓
600 EAST COLONIAL DRIVE
SUITE 100
ORLANDO FL 32803

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$1,950,000.00** ✓

10. Amount of Capital Contributions in FLORIDA to date. **1,950,000.00**

11. MAKE CHECK PAYABLE TO 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 #	P98000005938 ✓	STREET ADDRESS	
NAME	SCHRIMSHER, INC. ✓	CITY-ST-ZIP	
STREET ADDRESS	600 E. COLONIAL DR., #100 ✓		
CITY-ST-ZIP	ORLANDO FL 32803		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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:  **Steven Schrimsher** 2/25/01 (407) 423-7600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)