FILE ON OR BEFORE DECEMB WILL BE SUBJECT TO RE	ER 31, 1998 OR LIMITED PAI VOCATION AND <u>\$500 PENAI</u>	rtnership <u>.Ty</u> fee			
LIMITED PARTNERSHIP ANNUAL REPORT 1999	Sandra B Secretar	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS	
1. Name of Limited Partnership	1a. DOCUM A27271			PM 3: 02	
CANGO PARTNERS III, A LIMITED PARTNERSHIP					
Mailing Address	Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.	
C/O GRANITO	C/D GRANITO	C/O GRANITO			
7139 TIMBER DR WINTER PARK FL 32792	7139 TIMBER DR	7139 TIMBER DR WINTER PARK FL 32792		\$435,000.00	
WINTER FAIT PL 32/32	WINTER PARK PL 32/92	WINTER FARK FL 32/32		5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	. 2a. Principal Office Address	2a. Principal Office Address		to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			
City & State	City & State	City & State		Not Applicable	
Zip Country	Zip	Zip Country		\$8.75 Additional Fee Required	
			8. Make check payable to: Dept. of S	State (See reverse side for fee information)	
9. Name and Address of Curr	ent Registered Agent		10. If changed, new Registered	Agent/Office	
GRANITO, MARGARET P.		Name			
GRANITO ACCOUNTING SERVICES		Street Address (P.O.	t Address (P.O. Box Number Is Not Acceptable) Apt. #, etc.		
		Suite, Apt. #, etc.			
		City FL Zip Code			
10a. Pursuant to the provisions of sections 620.1051 for the purpose of changing its registered office cagent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment)_	r registered agent, or both, in the State of Flori	d limited partnership orga da. Such change was aut	inized or registered under the laws of the horized by its general partner(s). I hereby DATE	State of Florida, submits this statement accept the appointment of registered	
A GENERAL PARTNER THA MU	T IS A CORPORATION, L ST BE REGISTERED AN	IMITED PAR	TNERSHIP OR OTHE TH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each Genera (Do NOT Use Post Office Bo		City, State & Zip Code	11c. Registration/ Document Number	
J.J.K. COLONIAL DRIVE REALTY	7139 TIMBER DR	WI	nter park fl	K40742	
			40000271 -12/02/9 *****535	-09949 801038025 5.00 ****\$535.00	
Note: General partners MAY NO	T be changed on this form	n; an amendme	ent must be filed to cha	nge a general partner.	
12. I do hereby certify that the information supplied with Corporations from any llability of non-compliance with this annual report is true and accurate and that my empowered to execute this report as required by ch	this filing is voluntarily furnished and does not th Section 19.07(3)(k) in the event that the inf ignature shall-have the same legal effects as it	qualify for the exemption ormation supplied is deen	stated in Section 119.07(3)(k), Florida Stated exempt from public access. I further of	atutes. I release the Division of certify that the information Indicated on	
SIGNATURE					
Typed or Printed Name of General Partner Signing Form <u>C.J. CHUDNOFF</u> Daytime Telephone Number 1-500.704-2251					