2001	UNIFORM	BUSINESS	REPORT	/URR
ZUUI	UNITONIN	DUSINESS	REPURI	(VDI)

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

DOCU 1. Entity Nan	MENT	# A3351	3	•					
PARKER REAL ESTATE PARTNERS III, LTD.					FILED				
Principal Place of Business Mailing Address				a	01 FEB -5 AM 10: 51				
810 N.E. 20TH AVE. FT. LAUDERDALE FL 33304		- ,,		SEGRETARY OF STATE ALLAHASSEE, FLORIDA					
2. Principal Place of Business		3. Mailing Address			91 01161 11009 1111 01914 P	1911 BIBN BIBN BIBN B1811 IABN			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE					
City & Stat	te		City & State		4. FEI Number 65-03	77312	Applied For Not Applicable		
Zip		Country	Zip	Cour	ntry	5. Certificate of Status D	Desired	\$8.75 Additional Fee Required	
	6. Name	and Address of Current I	Registered Agent	1		7. Name and Address of	of New Registered		
					Name	and the same of th			
200 HARV	ARD CORP.	· · · · · · · · · · · · · · · · · · ·	 -	-	Street Address (P.O. Box Number is Not Acceptable)				
810 N.E. 2	20TH AVE.								
ft. Laudi	erdale fl	33304							
					City		FL	Zip Code	
8. The above	named entity	submits this statement for	the purpose of changing i	ts register	ed office or registere	ed agent, or both, in the St	ate of Florida.		
SIGNATURE	Signature, typed o	or printed name of registered agent a	nd title if applicable. (NO	OTE: Registere	d Agent signature required	when reinstating)	DATE		
9. Capital Co as Shown	on record.	\$3,000,000.00	10. Amount of Cap in FLORIDA to	date.	1,046,83	54.20 SEI	E REVERSE SIDE FO	E TO DEPT. OF STATE OR FEE INFORMATION	
	A C	ENERAL PARTNER T	HAT IS A BUSINESS E Y NOT be changed on	NTITY M	UST BE REGIST	ERED AND ACTIVE W	iTH THIS OFFICI	E. rtner.	
12.	HOIL.	GENERAL PARTNER		13.	,		ESS CHANGES ON		
DOCUMENT #	L30719			cmi	EET ADDRESS	,			
NAME STREET ADDRESS	200 HARVARD CORP.				'-ST-ZIP				
CITY-ST-ZIP	ft. Laude	RDALE FL 33304							
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CITY-ST-ZIP			···	CITY	-ST-ZIP				
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14! 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 520, Florida Statutes SIGNATURE: SIGNATURE									
	_	SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING GENE	RAL PARTNE	R	l Date	` /	Say me Phone #	