2006 LIMITED PARTNERSHIP ANNUAL-REPORT

	Due By May 1, 2006		Jan 31, 2006 U8:00 Al
DOCUMENT #A9200000213		A Ta	Secretary of State
1. Entity Na ST. JOH	me N HOUSING LIMITED PARTNERSHIP III		
P.O. BOX 0	ce of Business Mailing Address 15344 P.O. BOX 015344 33101-5344 MIAMI, FL 33101-5344		t (semint) vein leive held ablik ablik ablik ablik semi semi semi desa dista ki den
E	OO NOT WRITE IN THIS SPA	ACE	01052006 No Chg-LP
}		•	65-0390527 Not Applicat
	A second	·	5. Certificate of Status Desired 58.75 Additional Fee Required
	6. Name and Address of Gurrent Registered Agent	 	
ST. JOHN HOUSING CORPORATION III, INC. 1324 N.W. 3RD AVENUE MIAMI, FL 33136			DO NOT WRITE IN THIS SPACE
8. The above	e named entity submits this statement for the purpose of changing its regist	ered altice or register	ed agent, or both, in the State of Florida. I am familiar with, and accept
_	ulions of registered agent.		
SIGNATURE	Signature, typed or printed name of registered agent and ritle it applicable.		CATE
	FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00		
 -	A GENERAL PARTNER THAT IS A BUSINESS ENTITY NOTE: General Partners MAY NOT be changed on the for	MUST BE REGIST	FERED AND ACTIVE WITH THIS OFFICE.
12.	GENERAL PARTNER INFORMATION	, , , , , , , , , , , , , , , , , , , ,	The state of the s
DOCUMENT #	P92000013790		
NAME Street address	ST. JOHN HOUSING CORPORATION III	•	1000000410000
CATY-ST-ZYP	MIAMI, FL 33136		02/10/05-80066-022 508.75
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14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 cath; that I am a General Partner of the limited partnership or the receiver or trustee suppowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

STREET ADDRESS CHY-ST-ZIP

STAPLE CHECK HERE

NAME OF STANDING GENERAL PARTNER

305-751-4417