DOCUMENT # A9200000213 ^{1. Entity Name} ST. JOHN HOUSING LIMITED PARTNERSHIP III			SECRETARY OF STATE DIVISION OF CORPORATIONS 07 JAN 16 AM 9: 17
Principal Place of Business P.O. BOX 015344 MIAMI, FL 33101-5344	Mailing Address P.O. BOX 015344 MIAMI, FL 33101-5344		
DO NOT WRITE IN THIS SPA 6. Name and Address of Current Registered Agent		CE 4. FEI Number 65-0390527 5. Certificate of Status Desired 188.75 Additiona Fee Required	
ST. JOHN HOUSING CORPORATION III, INC. 1324 N.W. 3RD AVENUE MIAMI, FL 33136			DO NOT WRITE IN THIS SPACE
After Ma A GENERAL PART NOTE: General Partne 12. GENERAL P. D0CUMENT (P92000013790	E NOWIII FEE IS \$500.00 y 1, 2007, Fee will be \$900.00 NER THAT IS A BUSINESS ENTITY N prs MAY NOT be changed on the form ARTNER INFORMATION	NUST BE REGIS n; an amendme	DATE STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.
NAME ST. JOHN HOUSING COF STREET ADDRESS 1324 N.W. 3RD AVENUE (ITY-ST-ZIP MIAMI, FL 33136 DOCUMENT / NAME STREET ADDRESS (ITY-ST-ZIP DOCUMENT /			200085015308 01/18/0701038002 **508. 8 5
NAME STRET ADDRESS CITY-ST-ZIP DDCUMENT / NAME STRET ADDRESS CITY-ST-ZIP DOCUMENT /			DO NOT WRITE IN THIS SPACE
DUCUMENT / STREET ADDRESS CITY - ST - ZIP DOCUMENT / NAME STREET ADDRESS CITY - ST - ZIP	,		
 I hereby certify that the information supplicated on this report is true and accur. 	lied with this filing does not qualify for the e ate and that my signature shall have the sam gepute this report as required by Chapter 62	le legal effect as if	ned in Chapter 119, Florida Statutes, I further certily that the informal made under oath; that I am a General Partner of the limited partners

:

•