


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR -2 AM 11:23

DOCUMENT # A94000000942 1. Entity Name WYGLE FAMILY LIMITED PARTNERSHIP III					
Principal Place of Business 5700 70TH AVENUE NORTH PINELLAS PARK, FL 33781			Mailing Address 5700 70TH AVENUE NORTH PINELLAS PARK, FL 33781		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01102005 Chg-LP CR2E003 (10/03)	
Zip		Country		4. FEI Number 59-3273819	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WYGLE, NANCY R 5700 70TH AVENUE NORTH PINELLAS PARK, FL 33781			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$202,833.82		10. Amount of Capital Contributions in FLORIDA to date. \$202,833.82			
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 #	NAME		STREET ADDRESS		
NAME	WYGLE, NANCY R		CITY-ST-ZIP	PINELLAS PARK, FL 33781	
STREET ADDRESS	5700 70TH AVENUE NORTH				
CITY-ST-ZIP	PINELLAS PARK, FL 33781				
DOCUMENT #			STREET ADDRESS	500048085305	
NAME			CITY-ST-ZIP	03/09/05--01055--011 **526.25	
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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: <u>Nancy R. Wygle</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<u>2/28/05</u> <small>Date</small>		<u>727-545-9555</u> <small>Daytime Phone #</small>

STAPLE CHECK HERE