FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



G.L. HOMES OF BOYNTON BEACH ASSOCIATES III, LTD.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

A96000000863

DOCUMENT#

FILED 98 DEC 22 PM 4: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA



Meiling Address 1401 UNIVERSITY DRIVE, SUITE 200 CORAL SPRINGS FL 33071	Principal Office Address 1401 UNIVERSITY DRIVE. SUITE 200 CORAL SPRINGS FL 33071		3. Date Formed or Registered 05/07/1996 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$5,000,000.00	
			12/26/1997 4. State or Country of Formation	5b. Amour Contrib to date	SUCCES IN FLORIDA I
2. Mailing Address	2a. Principal Office Address	Za. Principal Office Address		\$5,000,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For Not Applicable	
City & State	City & State			X	\$8.75 Additional Fee Required
Zip Country	Zip C	ountry	8. Make check payable to: Dept. of State (See reverse side for fee information)		
9. Name and Address of Curr	ent Registered Agent		10. If changed, new Registere	d Agent/Office	
		Name			
GRANT, MARK F 200 EAST BROWARD BLVD., 15TH FLOOR		Street Address (P.O. Box Number is Not Acceptable)			
FORT LAUDERDALE FL 33301		Suite, Apt. #, etc. 3000027384137			
		City -01/12/99 -01075200 015 ****535.00L ****535.00 c.			
agent. I am familiar with, and accept the obligation	or registered agent, or both, in the State of Florida.				
SIGNATURE (Registered Agent Accepting Appointment)	TIO A CORDODATION LI	WITCH DAT	DATE	D D(10)	EGO ENTITY
A GENERAL PARTNER THA	ST BE REGISTERED AND			K BOSIN	IE99 EN III I
11. Name(s) of General Partner(s)	11a. Address of Each General P		City, State & Zip Code	11c.	Registration/ Document Number
G.L. HOMES OF BOYNTON BEACH III Corporation	1401 UNIVERSITY DRIVE	С	ORAL SPRINGS FL 3307 P96000026088		000026088 (8)
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oy a			TJC	IAN -	7 1000
•			******		
Note: General partners MAY NO	T be changed on this form;	an amendm	ent must be filed to cha	ange a ge	neral partner.
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance w this annual report is true and accurate and that my empowered to execute this report as required by ch	ith Section 119.07(3)(k) in the event that the information signature shall have the same legal effects as if m	nation supplied is dec	emed exempt from public access. I further	certify that the ir	formation indicated on
SIGNATURE MAN	ar_		DATE	12/16/9	32
Typed or Printed Name of General Partner Signing Form _	Richard M. Norwal	k, Vice	President Daylime Telephone Number 9	54-753·	-1730