## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

STAPLE

SIGNATURE:

## FILED 04 JAN 30 PH 2: 29 SECRETARY OF STATE TALLAHASSEE FLORIÐA 01092004 Chg-LP CR2E003 (10/03) Applied For 4. FEI Number 65-0760137 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Zip Code DATE ADDRESS CHANGES ONLY 200027916872

Daytime Phone #

Date

**DOCUMENT # A97000001169** 1. Entity Name III T, LTD. Principal Place of Business Mailing Address 1 FINANCIAL PLAZA, #2001 2533 AQUA VISTA BLVD. FORT LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33394 2. Principal Place of Business 3. Mailing Address NEgmst 2845 Suite, Apt. #, etc. Suite, Apt. #, etc. TS1201 City & State City & State Landerdale Fort Zip Country 3304 6. Name and Address of Current Registered Agent MURRAY, DAVID G ESQ. Street Address (P.O. Box Number is Not Acceptable) 1401 E. BROWARD BLVD., #200 FT. LAUDERDALE, FL 33301 City 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 Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions 10. Amount of Capital Contributions \$13,003,731,00 in FLORIDA to date. as Shown on record. 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. GENERAL PARTNER INFORMATION 12. 13. DOCUMENT # P97000024967 STREET ADDRESS NAME TARDOT REALTY & INVESTMENTS, INC. STREET ADDRESS 1401 E. BROWARD BLVD. #200 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE, FL 33301 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 Tam a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by anapter 620. Florida Statutes

ATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER