2008 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2008 **FILED** Apr 23, 2008 08:00 AM Secretary of State **DOCUMENT #A99000001851** FLORIDA CAPITAL HOTEL PARTNERS III, LTD. Principal Place of Business Mailing Address 300 INTERNATIONAL PARKWAY, SUITE 300 300 INTERNATIONAL PARKWAY, SUITE 300 HEATHROW, FL 32746 HEATHROW, FL 32746 01102008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3614635 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SELBY, C. THOMAS DO NOT WRITE 300 INTERNATIONAL PARKWAY, SUITE 300 HEATHROW, FL 32746 IN THIS SPACE 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 FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 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 P99000098798 DOCUMENT # EPI HOTEL PARTNERS THREE, INC. STREET ADDRESS 300 INTERNATIONAL PARKWAY, SUITE 300 CITY-ST-ZIP HEATHROW, FL 32746 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS. CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP

14. I hereby certify that the information supplied with this filing 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 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:

DOCUMENT 4 NAME ... STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER