

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Mar 23, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # B93000000556</b> 1. Entity Name ASSOCIATED HOUSING DEVELOPMENT PARTNERS III, L.P., LTD.					
Principal Place of Business 1551 SANDSPUR ROAD MAITLAND, FL 32751			Mailing Address P.O. BOX 4961 ORLANDO, FL 32802-4961		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 51-0351870	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
5. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 NORTH ORANGE AVENUE, SUITE 1100 ORLANDO, FL 32801				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 state if applicable</small>					
9. Capital Contributions as Shown on record. \$200.00			10. Amount of Capital Contributions in FLORIDA to date.		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	F93000005705		STREET ADDRESS	U000000274103	
NAME	ASSOCIATED HOUSING DEVELOPMENT CORP. II		CITY-ST-ZIP	03/23705-80056-011 141.25	
STREET ADDRESS	1013 CENTRE ROAD		STREET ADDRESS		
CITY-ST-ZIP	WILMINGTON, DE 19805		CITY-ST-ZIP		
DOCUMENT #	P92000001642		STREET ADDRESS		
NAME	FAMILY AFFORDABLE PARTNERS, INC.		CITY-ST-ZIP		
STREET ADDRESS	1551 SANDSPUR ROAD		STREET ADDRESS		
CITY-ST-ZIP	MAITLAND, FL 32751		CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS		
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CITY-ST-ZIP			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)(f), 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.					
BY: <u>FAMILY AFFORDABLE PARTNERS, INC.</u> <b>SIGNATURE:</b> _____ <span style="float: right;">3/9/05 407/741-8822</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> <span style="float: right;"><small>Date</small> <small>Telephone Phone #</small></span>					
TRICIA DOODY, VICE PRES.					

STAPLE CHECK HERE