2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED Apr 05, 2004 08:00 AM Secretary of State

4/1/04

	DOCUMENT # B9400000083 1. Entity Name SOUTH ATLANTIC VENTURE FUND III, LIMITED PARTNERSHIP							Secretary of State			
	Principal Place of Business Mailing Address 614 WEST BAY STREET, SUITE 200 614 WEST BAY STREET TAMPA, FL 33606-2704 TAMPA, FL 33606-27						200				
ľ	2. Principal P	Principal Place of Business 3. Mailing Address									
	Suite, Apt.	Suite, Apt. #, etc. City & State			Suite, Apt. #, etc.		02202004	Chg-LP	CR2E003 (10/03)		
+	City & Stat				City & State			4. FEI Number 59-3233	309		Applied For Not Applicable
	Zip	Country			Zip Cour		stry	5. Certificate of Status Desire			3.75 Additional se Required
1	Name and Address of Current Registered Agent					.1	7. Name and Address of New Registered Agent				
	DUDTON DOWN DW						Name				
	BURTON, DONALD W. 3603 BAYSHORE BOULEVARD TAMPA. FL 33629-8942						Street Address (P.O. Box Number is Not Acceptable)				
	I AIVIPA, FI	L 33029-	0942								
1							City			FL	Zip Code
	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. DATE										
1	P. Canital Contributions 10. Amount of Canital Contri					hutions		T	DATE		
-	as Shown on record. \$39,750,000.00 in FLORIDA to date.					555,75					
-		A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGIST NOTE: General Partners MAY NOT be changed on the form; an amendment									ier.
Ì	12. GENERAL PARTNER INFORMATION 13.								ADDRESS CHA	NGËS ONLY	
	DOCUMENT # NAME	B94000000082 SOUTH ATLANTIC VENTURE PA					EET ADDRESS	•			
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	14. I hereby indicated the recei	14. I hereby certify that the information supplied with this filling 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 eath; that I am a General Partner of the limited partnership of the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.									