

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

001978 AT

DOCUMENT # B94000000347

1. Entity Name

GORDON PROPERTY COMPANY III, L.P., LTD.

02 APR 22 PM 3: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
23123 S. STATE ROAD 7, SUITE 301
BOCA RATON FL 33428

Mailing Address
23123 S. STATE ROAD 7, SUITE 301
BOCA RATON FL 33428



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

DUE BY MAY 1, 2002

4. FEI Number 43-1579686 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GORDON, JAMES N
23123 S. STATE ROAD 7, SUITE 301
BOCA RATON FL 33428

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. \$9,900.00 10. Amount of Capital Contributions in FLORIDA to date. 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

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.

12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY	
DOCUMENT #	GORDON, JAMES N 23123 S. STATE ROAD 7, SUITE 301 BOCA RATON FL 33428	STREET ADDRESS	70.00 -LP	
NAME		CITY-ST-ZIP	88.75 Adm	
STREET ADDRESS				
CITY-ST-ZIP				
DOCUMENT #		STREET ADDRESS	500005362025--3	
NAME		CITY-ST-ZIP	04/29/02 01021-021	
STREET ADDRESS			***158.75***158.75	
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STREET ADDRESS				
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 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: James N. Gordon 4/8/02 (561) 451-0220

CR2E003 (9/01)