

Document Number Only

B95000000113

C T CORPORATION(S) SYSTEM

Requestor's Name

1311 Executive Center Drive, Ste. 200

Address

Tallahassee, Fla. 32301 (904) 656-8298
City State Zip Phone

CORPORATION(S) NAME

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 23 PM 2:42

DIVISION OF CORPORATIONS

RECEIVED

95 MAR 23 AM 1:28

The Realty Associates Fund III, Limited Partnership

NYC

() Profit G. TAX
() NonProfit FILING 17.52 W
R. AGENT FEE 35.00 () Amendment

() Foreign C. COPY 6.75 () Dissolution/Withdrawal

() Limited Partnership S. BANK
() Reinstatement BALANCE DUE () Annual Report
() Reservation

() Certified Copy () Photo Copies

() Call When Ready () Call If Problem
() Walk In () Wm Wait

() Mail Out

() Merger

() Mark

() Other

() Change of R.A.

() Fictitious Name

CU8 / 8/8

() After 4:30

() Pick Up

Name	
Availability	NYC
Document	
Examiner	
Updater	
Verifier	
Acknowledgment	
W.P. Verifier	

3/23/95

3.00

3.20-55

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

100001440111
-03/27/95--01028--014
***1785.00 ***1785.00

File 4th

100001440111
-03/27/95--01028--015
*****8.75 *****8.75

CN2E031 (1-89)

Florida Department of State, Jim Smith, Secretary of State

APPLICATION BY FOREIGN LIMITED PARTNERSHIP
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. The Realty Associates Fund III, L.P.
(Name of limited partnership as it is in the home state:)
2. The Realty Associates Fund III, Limited Partnership
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")
3. Delaware 4. 12-15-93
(State of Formation) (Date of Formation)
5. C T CORPORATION SYSTEM
(Name of Registered Agent for Service of Process)
6. c/o C T Corporation System, 1200 South Pine Island Road
(Street Address of Registered Office)
Plantation, Florida 33324
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process.
Marilyn Lizzio
(Officer must sign on this line)
MARILYN LIZZIO - Asst. Secy.
(Type Name and Title of Officer)
8. c/o TA Associates Realty, 45 Milk Street, Boston, MA 02109
(Address of Registered Office required in State of Formation or, if not required, Address of Principal Office.)
9. NAME OF GENERAL PARTNERS SPECIFIC ADDRESS
Realty Associates Fund III GP Limited Partnership B9500000112 c/o TA Associates Realty, 45 Milk Street, Boston, MA 02109
Realty Associates Fund III Texas Corporation F95000001406 c/o TA Associates Realty, 45 Milk Street, Boston, MA 02109
10. c/o TA Associates Realty, 45 Milk Street, Boston, MA 02109
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is cancelled or withdrawn.
12. c/o TA Associates Realty, 45 Milk Street, Boston, MA 02109
(Mailing Address of Limited Partnership)

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This 12th day of March, 1995.
By: Realty Associates Fund III GP Limited Partnership, general partner
By: Realty Fund III GP, Inc., its general partner
By: Arthur I. Segel, President

STATE OF Massachusetts

COUNTY OF Suffolk

THE FOREGOING instrument was acknowledged and sworn to before me this 12th day of March, 1995, by Arthur I. Segel, President (Name of General Partner) of Realty Fund III GP, Inc., general partner of Realty Associates Fund III Limited Partnership, general partner of The Realty Associates Fund III, Limited Partnership (Name of Limited Partnership), A Delaware (State or Country) Limited Partnership, on behalf of the Limited Partnership.

James H. Keene
Notary Public
State of Mass at Large

(SEAL)

My Commission Expires:
9.26.97

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Arthur I. Segel, President of, a general partner of The Realty Associates Fund III, Limited Partnership, a Delaware, limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

Realty Fund III GP, Inc., general partner of Realty Associates Fund III GP Limited Partnership,

1. The amount of capital contributions of the limited partners is \$ 439,390,000. -

2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 25,000,000.00

\$25,000,000.00

This 12th day of March, 1995.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.

General Partner
Realty Associates Fund III GP Limited Partnership
By: Realty Fund III GP, Inc.

By: Arthur I. Segel
President

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STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 MAR 23 PM 2:42

STATE OF Massachusetts
COUNTY OF Suffolk
DATE _____

Realty Fund III GP, Inc., general partner of Realty Associates Fund III GP Limited Partnership

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared Arthur I. Segel, President of (General Partner), known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.

President of the General Partner of the

WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 12th day of March, 1995.

James H. Keri
Notary Public

Seal

State of Mass at Large
My Commission Expires:
9.26.97

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sydney M. Nathan
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
B95000000113

**THE REALTY ASSOCIATES FUND III, LIMITED
PARTNERSHIP**

Mailing Address

C/O TA ASSOCIATES REALTY
45 MILK STREET
BOSTON MA 02109

Principal Office Address

C/O TA ASSOCIATES REALTY
45 MILK STREET
BOSTON MA 02109

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA
03/23/1995

3a. Date of Last Report

4. State or Country of Formation
DE

5a. Capital Contributions as Shown
on Record
\$25,000,000.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FEI Number

04-3216723

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$5.75 Additional Fee required
for a Certificate of Status

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2.) Supplemental Fee: \$138.75 (pursuant to section 607.163, F.S.)

THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)

Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. If changed, new Registered Agent/Office

Name

400001684704

Street Address (P.O. Box Number is Not Acceptable)

-01/10/95--01092--005

Suite, Apt. #, etc.

*****576.25 ***576.25**

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

REALTY ASSOCIATES FUND III G
REALTY ASSOCIATES FUND III T

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

C/O 45 MILK STREET
C/O 45 MILK STREET

11b. City, State & Zip Code

BOSTON MA 02109
BOSTON MA 02109

11c. Registration/
Document Number

B95000000112
F95000001408

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Robert De Gaeta

DATE

12-1-95

Typical Printed Name of General Partner Signing Form

Robert De Gaeta

Telephone Number

617-338-4300