

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 15, 2008 08:00 AM
Secretary of State

DOCUMENT # B97000000372	
1. Entity Name ARVIDA/WESTON CONTRACTORS - III, L.P.	
Principal Place of Business 900 NORTH MICHIGAN AVE., SUITE 1400 CHICAGO, IL 60611	Mailing Address 900 NORTH MICHIGAN AVE., SUITE 1400 CHICAGO, IL 60611



03272008 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0766577	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
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

DATE

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.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	F95000004506
NAME	ARVIDA/WESTON CONTRACTORS, INC.
STREET ADDRESS	900 NORTH MICHIGAN AVE.
CITY-ST-ZIP	CHICAGO, IL 60611

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04/28/08-80022-013 500.00

**DO NOT WRITE
IN THIS SPACE**

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

Karen M. Ewing, Assistant Secretary of Arvida/WESTON Contractors, Inc.

SIGNATURE:

Karen M. Ewing

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

03/27/08 (312) 915-1969

Date

Daytime Phone #

STAPLE CHECK HERE