2001 UNIFORM BUSINESS REPOR	lt ((UBR
-----------------------------	------	------

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DOCUN 1. Entity Name		# B9800	00000	662					Ē	
CASDEN PROPERTIES GP III LIMITED PARTNERSHIP					FILED					
<u>, </u>						01	APR 12 PM 2:	Ŋ٩		
Principal Place of Business Mailing Address 9090 WILSHIRE BLVD 3RD FLOOR 9090 WILSHIRE BLVD 3RI BEVERLY HILLS CA 90211 BEVERLY HILLS CA 90211			HIRE BLVD 3RD FLO	OOR	SE TAL	CAETARY OF STAT LAHASSEE, FLORI	-			
Principal Place of Business 3. Mailing Address			Address							
Suite, Apt. #, etc. Suite,			Suite, A	pt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State	9		City & S	ity & State		4. FEI Number 95–4718	988	Applie	ed For pplicable	
Zip		Country	Zip	Zip Countr		5. Certificate o		\$8.75 Addition		
6. Name and Address of Current Registered Agent					7. Name and A	ddress of New Registere	•			
NATIONAL CORORATE RESERACH, LTD., INC.				Name						
1406 HAYS STREET				Sileet Addres	Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32301										
				City FL Zip Code						
8. The above	named entit	y submits this statement for	or the purpose	of changing its regi	stered office or regis	tered agent, or both	in the State of Florida.			
SIGNATURE _	Signature, typed	or printed name of registered agent	and title if applicab	ie (NOTE: Rog	istered Agent signature requ	irad uhan rajaatatiaa)	DATE			
9. Capital Cor	ntributions	\$99.00	10. /	Amount of Capital Co		irea when reinstating)	11. MAKE CHECK PAYAE		TATE	
as Shown o				n FLORIDA to date.	V MUST BE BEG	STERED AND A	SEE REVERSE SIDE		ATION	
	NOTE	: General Partners M	AY NOT be o	hanged on the fo	orm; an amendm	ent must be filed	to change a general p	oer, partner.		
12.	Foodooo	GENERAL PARTNE	R INFORMATI	ON	13.		ADDRESS CHANGES (ONLY		
	F98000000 CASDEN I	5335 Properties QRS III II	NC.		STREET ADDRESS	RESS				
STREET ADDRESS	RESS 9090 WILSHIRE BLVD., 3RD FLOOR			CITY-ST-ZIP						
DOCUMENT # NAME					STREET ADDRESS				- 20	
STREET ADDRESS CITY-ST-ZIP					CITY-ST-ZIP					
DOCUMENT#					STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP					CITY-ST-ZIP	n 20	100 <u>0</u> 04 <u>0</u> 14	L652-	_2	
DOCUMENT # NAME					STREET ADDRESS	The	*****52.50	****** 52.	.50	
STREET ADDRESS CITY-ST-ZIP					CITY-ST-ZIP	20	00004014	1652 —	-2	
DOCUMENT # NAME					STREET ADDRESS	1	*****88.75	5 *****88.		
STREET ADDRESS CITY-ST-ZIP					CITY-ST-ZIP		7 / X			
DOCUMENT #			· · ·		STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				ļ	CITY-ST-ZIP					
		ne information supplied wi ort is true and accurate an e empowered to execute to By: Casden Pro		ature shall have the sequired by Chapter 6 QRS III It	same legal effect as 520, Florida Statutes nc., its ge	neral parts	i, Florida Statutes. I further that I am a General Partne 1ex	certify that the info r of the limited part	rmation tnership or	
SIGNATURE: Andrew J. Starrels, Senior Vice-President & Gen. Coun. 2/8/01 (310) 274-5553										

Date

Daytime Phone #