


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # F97000005900 1. Entity Name SUNWEST PROPERTIES N.C. III, INC.	
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Principal Place of Business 17776 PRESTON RD., STE. 100 DALLAS, TX 75252	Mailing Address 17776 PRESTON RD., STE. 100 DALLAS, TX 75252
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DO NOT WRITE IN THIS SPACE



01192004 No Chg-P CR2E034 (10/03)

4. FEI Number 75-2721401	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" 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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

000000126805
04/23/04-80049-013 158.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PIERSON, ROBERT J SR. 17776 PRESTON RD., STE. 100 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PIERSON, ROBERT J JR. 17776 PRESTON RD., STE. 100 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIERSON, JUDITH A 17776 PRESTON RD., STE. 100 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FREEMAN, ROLAND D 17776 PRESTON RD., STE. 100 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LAFLEUR, RITA M 17776 PRESTON RD., STE. 100 DALLAS, TX 75252
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/04 (972) 931-1400
Date Daytime Phone #