2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2004
Secretary of State

DOCUMENT# F98000003785

Entity Name: BLUEGREEN RECEIVABLES FINANCE CORPORATION III

Current Principal Place of Business:

4960 BLUE LAKE DRIVE
SUITE 100
BOCA RATON, FL 33431

New Principal Place of Business:

4960 CONFERENCE WAY NORTH
SUITE 100
BOCA RATON, FL 33431

Current Mailing Address:

4960 BLUE LAKE DRIVE
SUITE 100
BOCA RATON, FL 33431

New Mailing Address:

4960 CONFERENCE WAY NORTH
SUITE 100
BOCA RATON, FL 33431

FEI Number: 06-1519701 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: TOMPKINS, RANDI S
Address: 4960 CONFERENCE WAY N., STE 100
City-St-Zip: BOCA RATON, FL 33431

Title: TASD ( ) Delete
Name: CHISTE, JOHN F
Address: 4960 CONFERENCE WAY N., STE 100
City-St-Zip: BOCA RATON, FL 33431

Title: VASD ( ) Delete
Name: HERZ, ALLEN J
Address: 4960 CONFERENCE WAY N., STE 100
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete
Name: CONFORTI, GERARD
Address: 9250 ALTERNATE A1A, SUITE J
City-St-Zip: LAKE PARK, FL 33403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDI TOMPKINS PS 01/13/2004

Electronic Signature of Signing Officer or Director — Date