## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030310

Entity Name: CAPITAL GROWTH ASSET BASED BRIDGE LOAN FUND III, LLC

Apr 30, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

225 N.E. MIZNER BLVD., SUITE 750 1200 NO. FEDERAL HWY BOCA RATON, FL 33432

SUITE 400

BOCA RATON, FL 33432

**Current Mailing Address: New Mailing Address:** 

225 N.E. MIZNER BLVD., SUITE 750 1200 NO. FEDERAL HWY SUITE 400

BOCA RATON, FL 33432 BOCA RATON, FL 33432

FEI Number: 20-2569795 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

JACOBS, MICHAEL JACOBS, MICHAEL

225 N.E. MIZNER BLVD., SUITE 750 1200 NO. FEDERAL HWY SUITE 400 BOCA RATON, FL 33432 BOCA RATON, FL 33432

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: 04/30/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change ( ) Addition

CAPITAL GROWTH INVES, T. FUND ADVISO R S, LLC CAPITAL GROWTH INVES, T. FUND ADVISO R S, LLC Name: Name:

225 N.E. MIZNER BLVD., SUITE 750 Address: 1200 NO. FEDERAL HWY SUITE 400 Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432

Title: MGRM ( ) Delete Title: (X) Change ( ) Addition CAPITAL ACCESS GROUP, , LLC Name: CAPITAL ACCESS GROUP, , LLC Name:

Address: 95 SOUTH FEDERAL HIGHWAY, SUITE 200 Address: 1200 NO. FEDERAL HWY SUITE 400 City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432

Title: MGRM ( ) Delete Title: () Change () Addition

CROSSROADS COLLATERA, L MANAGEMENT F U ND, LLC Name: Name:

Address: 2201 N.W. CORPORATE BLVD. Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL JACOBS 04/30/2007