## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 14, 2004 08:00 AM Secretary of State

DOCUMENT	#	M00000002206
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1. Entity Name

**GPI PROPERTIES III LLC** 



Principal Place of Business

2635 MILLBROOK RD. RALEIGH, NC 27604

SIGNATURE:

Mailing Address

2635 MILLBROOK RD. RALEIGH, NC 27604



## DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MAZAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04072004 No Chg-LLC	CR2E083 (10/03)
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4. FEI Number 56-2186703

5. Certificate of Status Desired 

\$5.00 Additional Fee Required

Applied For

Daytime Phone #

Not Applicable

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

## DO NOT WRITE IN THIS SPACE

			IN THIS SPACE				
	named entity submits this statement for the purpose of changing its ions of registered agent.	registered office or regist	tered agent, or both, in	the State of Florida. I am	familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable. (NOTE	E. Registered Agent signature requi	rod whom prior totals	DATE			
	Sunature, typed or primed realie to registered agent and title it approaches.		red when reinstaurg)	DATE.	7 (E) 1 (1) (E) (E) (E) (E) (E) (E) (E) (E) (E) (E		
F D	iling Fee is \$50.00 ue by May 1, 2004	· · · · · · · · · · · · · · · · · · ·		U0000011244 90022-14/04/14/04			
9.	MANAGING MEMBERS/MANAGERS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VALLEY MASTER PARTENRSHIP LTD PARTENRSHIP 2635 MILLBROOK RD RALEIGH, NC						
TITLE NAME STREET ADDRESS GITY-ST-ZIP			· man of the contract of the c				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO N	OT WRITE			
title Name Street address City-St-Zip			IN TH	IIS SPACE	**************************************		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2 A 10 M 10 A 10 A 10 A 10 A 10 A 10 A 10	- 4 - 1		,			
11. I hereby of indicated limited liab	certify that the information supplied with this filing does not qualify of on this report is true and accurate and that my signature shall have the bility company or the receiver or trustee employeed to execute this p	he exemption stated in S he same legal effect as it eport as required by Cha	Section 119.07(3)(i), Flo made under oath; that pter 608, Florida Statut	rida Statutes. I further cert I am a managing membe es.	ify that the information r or manager of the		