## 2008 LIMITED LIABILITY COMPANY

## **FILED ANNUAL REPORT** Apr 15, 2008 08:00 AN Secretary of State DOCUMENT # M0000002206 1. Entity Name **GPI PROPERTIES III LLC** Principal Place of Business Mailing Address 2635 MILLBROOK RD. 2635 MILLBROOK RD. RALEIGH, NC 27604 RALEIGH, NC 27604 04032008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2186703 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) DATE Uonogosjegs<sub>72</sub>, FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 28/08-80016-002 138.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE VALLEY MASTER PARTENRSHIP LTD PARTENRSHIP NAME 2635 MILLBROOK RD STREET ADDRESS RALEIGH, NC 27604 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP HIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

Samuel T. Oliver, T