

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000003539

**FILED**  
**Jun 12, 2012**  
**Secretary of State**

**Entity Name:** C-III ASSET MANAGEMENT LLC

**Current Principal Place of Business:**

5221 N. O'CONNOR BLVD.  
SUITE 600  
IRVING, TX 75039

**New Principal Place of Business:**

**Current Mailing Address:**

5221 N. O'CONNOR BLVD.  
SUITE 600  
IRVING, TX 75039

**New Mailing Address:**

300 N MAIN STREET,  
SUITE 402  
GREENVILLE, SC 29601

**FEI Number:** 74-3026399

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: C-III CAPITAL PARTNERS LLC  
Address: 5221 N. O'CONNOR BLVD., SUITE 600  
City-St-Zip: IRVING, TX 75039

I hereby 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: YVONNE OWENS

A.S.

06/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date