

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000080096

1. Entity Name
SMALL COMMERCIAL PROPERTIES CORPORATION III



Principal Place of Business
1675 PALM BEACH LAKES BLVD., STE. 1002
ATTN: JOHN ERBEY
W. PALM BEACH FL 33401

Mailing Address
1675 PALM BEACH LAKES BLVD., STE. 1002
ATTN: JOHN ERBEY
W. PALM BEACH FL 33401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0785316

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ERBEY, JOHN R
1675 PALM BEACH LAKES BLVD., STE. 1002
W. PALM BEACH FL 33401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME ERBEY, WILLIAM C
STREET ADDRESS 1675 PALM BEACH LAKES BLVD., STE. 1002
CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE ☐ Change ☐ Addition
NAME 900010423259
STREET ADDRESS 01/22/03--01075--009 **150.00
CITY-ST-ZIP

TITLE P ☐ Delete
NAME FARIS, RONALD M
STREET ADDRESS 1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME ERBEY, JOHN R
STREET ADDRESS 1675 PALM BEACH LAKES BLVD., STE. 1002
CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SVP ☒ Delete
NAME BARNES, JOHN R
STREET ADDRESS 1675 PALM BEACH LAKES BLVD., STE. 1002
CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE V ☒ Change ☐ Addition
NAME MARK J. NICHOLS
STREET ADDRESS 1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE V/T ☒ Delete
NAME CZOCHANSKI, THOMAS J
STREET ADDRESS 1675 PALM BEACH LAKES BLVD
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE VT ☒ Change ☐ Addition
NAME ANDREW G. DOKOS
STREET ADDRESS 1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP WEST PALM BEACH, FL 33401

TITLE SVP ☐ Delete
NAME SHEPRO, WILLIAM B
STREET ADDRESS 1675 PALM BEACH LAKES BLVD
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other information empowered.

SIGNATURE: *Mark J. Nichols* REQUIRED NICHOLS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-682-8000

1/2/03

03/4379 AV

CR2E034 (10/02)

FILED
03 JAN 23 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

