

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 07, 2002 8:00 am**  
**Secretary of State**

05-07-2002 90393 021 \*\*\*\*50.00

DOCUMENT # **m9900000508**

1. Entity Name

REALTY ASSOCIATES FUND III LLC

**DO NOT WRITE IN THIS SPACE**

956130

2. Principal Place of Business

c/o TA Associates Realty

Suite, Apt. #, etc.

28 State Street, 10th Fl.

City & State

Boston, MA

Zip

02109

Country

USA

3. Mailing Address

c/o TA Associates Realty

Suite, Apt. #, etc.

28 State Street, 10th Fl.

City & State

Boston, MA

Zip

02109

Country

USA

4. FEI Number

04-3235872

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301-2525

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.

SIGNATURE

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

DATE

**FEE IS \$50.00**

**Make Check Payable to Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
Realty Associates Fund III Trust  
28 State Street, 10th Floor  
Boston, MA 02109

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IN THIS SPACE**

CR2E083B (12/01)

11. 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 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.

By: Realty Associates Fund III Trust, a MA Business Trust, sole member

SIGNATURE: *Theresa S. Suber*

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

4/22/02 6174762700