

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90024 041 ***150.00

DOCUMENT # 610897

1. Entity Name
ROYAL AMERICAN MANAGEMENT, INC.



Principal Place of Business
**1002 W 23 ST STE 400
PANAMA CITY, FL 32405-0608**

Mailing Address
**1002 W 23 ST STE 400
PANAMA CITY, FL 32405-0608**

40110111



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04202007 Chg-P CR2E034 (12/06)

4. FEI Number
59-1886258

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PIPPIN, LAURETTA J
1002 W 23 ST STE 400
PANAMA CITY FL, FL 32405-0608**

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, 2007 Fee will be \$550.00**

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 **V** ☐ Delete
NAME **CLEMO, C. SCOTT**
STREET ADDRESS **1002 W. 23RD, STE 400**
CITY-STATE-ZIP **PANAMA CITY, FL**

TITLE **V** ☐ Change ☒ Addition
NAME **Robert F. Henry, III**
STREET ADDRESS **1002 W. 23rd St., Ste. 400**
CITY-STATE-ZIP **Panama City, FL 32405**

TITLE **VT** ☒ Delete
NAME **BARR, JIMMY D**
STREET ADDRESS **1002 W 23 ST STE 400**
CITY-STATE-ZIP **PANAMA CITY, FL 32405**

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

TITLE **D** ☐ Delete
NAME **CHAPMAN, III, JOSEPH F.**
STREET ADDRESS **1002 W 23 ST STE 400**
CITY-STATE-ZIP **PANAMA CITY, FL**

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

TITLE **P** ☐ Delete
NAME **JOHNSTON, ROBERT F**
STREET ADDRESS **1002 W 23 ST STE 400**
CITY-STATE-ZIP **PANAMA CITY, FL 32405**

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

TITLE **ST** ☐ Delete
NAME **PIPPIN, LAURETTA J.**
STREET ADDRESS **1002 23 ST., STE. 400**
CITY-STATE-ZIP **PANAMA CITY, FL 32405**

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

TITLE **V** ☐ Delete
NAME **CHAPMAN, IV, JOSEPH F.**
STREET ADDRESS **1002 W. 23RD ST., SUITE 400**
CITY-STATE-ZIP **PANAMA CITY, FL**

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

12. 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 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 like empowered.

SIGNATURE

Lauretta J. Pippin, Secretary

4/23/07

(850) 769-8981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #