

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

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**

DO NOT WRITE IN THIS SPACE



02122008 No Chg-P CR2E034 (11/05)

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

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

**DO NOT WRITE
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 _____
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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	CLEMO, C. SCOTT
STREET ADDRESS	1002 W. 23RD, STE 400
CITY - ST - ZIP	PANAMA CITY, FL
TITLE	V
NAME	HENRY, ROBERT F III
STREET ADDRESS	1002 W 23 ST STE 400
CITY - ST - ZIP	PANAMA CITY, FL 32405
TITLE	D
NAME	CHAPMAN, III, JOSEPH F.
STREET ADDRESS	1002 W 23 ST STE 400
CITY - ST - ZIP	PANAMA CITY, FL
TITLE	P
NAME	JOHNSTON, ROBERT F
STREET ADDRESS	1002 W 23 ST STE 400
CITY - ST - ZIP	PANAMA CITY, FL 32405
TITLE	ST
NAME	PIPPIN, LAURETTA J.
STREET ADDRESS	1002 23 ST., STE. 400
CITY - ST - ZIP	PANAMA CITY, FL 32405
TITLE	V
NAME	CHAPMAN, IV, JOSEPH F.
STREET ADDRESS	1002 W. 23RD ST., SUITE 400
CITY - ST - ZIP	PANAMA CITY, FL

000000939302
05/28/08-80021-021 150.00

**DO NOT WRITE
IN THIS SPACE**

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

4/10/08

(850) 769-8981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #