## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

## DOCUMENT # A01908 04 APR 30 AM 8: 12 ROYÁL AMERICAN HOUSING, LTD. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1002 W. 23RD ST., SUITE 400 1002 W. 23RD ST., SUITE 400 PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092004 CR2E003 (10/03) Chg-LP City & State City & State 4. FEI Number Applied For 59-1448844 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Lauretta J. Pippin HENRY, ROBERT F. III Street Address (P.O. Box Number is Not Acceptable) 1002 W. 23RD ST SUITE 400 1002 W. 23rd St., Ste. 400 PANAMA CITY, FL 32405 Zip Cod 2405 City Panama City 8. The above named entity subritis 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 register 4/22/04 Lauretta J. Pippin SIGNATURE DATE 9. Capital Contributions 10. Amount of Capital Contributions as Shown on record. , \$173,350.00 in FLORIDA to date. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED'AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. DOCUMENT # STREET ADDRESS CHAPMAN, JOSEPH F., III NAME STREET ADDRESS 1002 W. 23RD ST., #400 CITY-ST-ZIP CITY-ST-7IP PANAMA CITY, FL DOCUMENT # 500036071865 <del>05/11/04-01088-020 \*\*\*</del>\$<del>35.00</del> STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes 4/22/04 (850) 769-8981 "Joseph F. Chapman, III SIGNATURE:

Daytime Phone #

SIGNATURE AND TWEE OR PRINTED NAME OF SIGNING GENERAL PARTNER