

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0000166 AV

DOCUMENT # A02215

1. Entity Name
GROVE PARK MANOR, LTD.



FILED

03 MAY -2 PM 6:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1002 W. 23RD ST., SUITE #400
PANAMA CITY FL 32405

Mailing Address
1002 W. 23RD ST., SUITE #400
PANAMA CITY FL 32405



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DUE BY MAY 1, 2003

4. FEI Number 59-1530662	Applied For
	Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HENRY, ROBERT F., III
1002 W. 23RD ST.
SUITE 400
PANAMA CITY FL 32405

7. Name and Address of New Registered Agent

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

9. Capital Contributions as Shown on record. \$2,411,200.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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.

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	598978 ROYAL AMERICAN DEV., INC 1002 W. 23RD ST., #400 PANAMA CITY FL
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	CHAPMAN, JOSEPH F., III 1002 W. 23RD ST., #400 PANAMA CITY FL
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	900017914839 05/02/03--01085--006 **45187.28
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<i>[Handwritten Signature]</i>
CITY-ST-ZIP	
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

SIGNATURE: *[Handwritten Signature]* **Lauretta Pippin, Asst. Sec. 4/28/03 (850)769-8981**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

CR2E003 (10/02)

SAMPLE CHECK HERE