

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

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

**DOCUMENT # A02355**

1. Entity Name  
**BRIARWOOD, LTD.**



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**



**DO NOT WRITE IN THIS SPACE**

01232008 No Chg-LP

CR2E003 (12/06)

4. FEI Number  
**59-1530663**

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. 23RD ST.**  
**SUITE 400**  
**PANAMA CITY, FL 32405**

**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

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2008, Fee will be \$900.00**

DATE  
**000000942783**  
**05/29/08-80034-010 508.75**

**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  
**CHAPMAN, JOSEPH F., III**  
**1002 W. 23RD ST., #400**  
**PANAMA CITY, FL**

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

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE IN THIS SPACE**

14. 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 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:**

**Lauretta J. Pippin, Secretary**

**4/10/08**

**(850) 769-8981**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE