

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A06822

1. Entity Name
TREETOP APARTMENTS, 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**

FILED

04 APR 30 AM 8:13

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



01162004 Chg-LP CR2E003 (10/03)

4. FEI Number
59-1919831

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$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 **Lauretta J. Pippin**

Street Address (P.O. Box Number is Not Acceptable)

1002 W. 23rd St., Ste. 400

City **Panama City**

FL

Zip Code **32405**

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

Lauretta J. Pippin

4/22/04

DATE

9. Capital Contributions
as Shown on record. **\$360,000.00**

10. Amount of Capital Contributions
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.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME **CHAPMAN, JOSEPH F. III**
STREET ADDRESS
CITY-ST-ZIP **1002 W. 23RD ST., #400
PANAMA CITY, FL**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

**500036071455
05/11/04--01088--011 **535.00**

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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:

Joseph F. Chapman, III

4/22/04

(850) 769-8981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE