2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED May 11, 2005 08:00 AN Secretary of State

DOCUMENT # A08428 1. Entity Name NORTHWOOD-MACCLENNY, LTD.				Secretary of Star	
Principal Place of Business Malling Address 1002 W. 23RD ST., SUITE 400 1002 W. 23RD ST., SUITE PANAMA CITY, FL 32405 PANAMA CITY, FL 32405			E 400 5		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite Apt #, etc.		04082005 Chg-LP CR2E003 (10/03)	
City & State		-City & State		4. FEI Number Applied For 59-1960373 Not Applicab	
Zip Country		Zīp	Country	5. Certificate of Status Desired	
6, Name and Address of Current Registered Agent		Name	7. Name and Address of New Registered Agent		
PIPPIN, LAURETTA J 1002 W. 23RD ST. SUITE 400 PANAMA CITY, FL 32405		. <u>-</u>	1	ess (P.O. Box Number is Not Acceptable)	
		-	City	r Zip Code	
- <u>-</u>			1	FL Zip Code istered agent, or both, in the State of Florida. I am familiar with, and accept	
the obligati	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office or regis	istered agent, or both, in the state of horida. I are lamited with, and secce	
SIGNATURE -	Signature, typed or printed name of registered agent a			DATE	
9. Capital Co as Shown	ntributions consider 040 00	10. Amount of Capita in FLORIDA to da			
	A GENERAL PARTNER TO NOTE: General Partners MA	HAT IS A BUSINESS EN' Y NOT be changed on th	TITY MUST BE REG le form; an amendm	SISTERED AND ACTIVE WITH THIS OFFICE. ment must be filed to change a general partner.	
12.	GENERAL PARTNER	INFORMATION	13.	ADDRÉSS CHANGES ONLY	
NAME STREET ADDRESS	ROYAL AMERICAN DEVELOPMI 1002 W 23RD STREET, SUITE 40 PANAMA CITY, FL 32405	ENT, INC.	STREET ADDRESS CITY+SY-ZIP		
DOCUMENT #	PANANA OTT, FL 32403	± 1%	STREET ADDRESS		
NAME STREET ADDRESS CITY-ST-ZIP	CHAPMAN III, JOSEPH F. 1002 W. 23RD ST. #400 PANAMA CITY, FL		CITY-ST-ZIP	(10000036\$426 0\$211205-80001-007_\$35.00	
DOCUMENT #			STREET ADDRESS	- 13-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16 - 14-16	
NAME STREET ADDRESS CITY-ST-ZIP			CITY-SI-ZIP		
DOCUMENT#		<u>*</u>	STREET ADDRESS		
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DOCUMENT # NAME	~		STREET ADDRESS		
STREET ADDRESS CITY-57-ZIP			CITY-ST-ZIP		
DOCUMENT # NAME			STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY-S1-ZIP	·	
14. I hereby a indicated the received	certify that the information supplied with I on this report is true and accurate and yer or truetee empowered to execute this	that my signature shall have to report as required by Chapt	the exemption stated in the same legal effect as ter 620, Florida Statutes uretta J. Pippin. Secn	in Section 119.07(3)(i), Florida Statutes. I further certify that the information is it made under cath; that I am a General Partner of the limited partnership is 4/25/05 (850) 769-8981	