


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # A08860 1. Entity Name SHERWOOD OAK APARTMENTS, LTD.	
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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
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DO NOT WRITE IN THIS SPACE



01102006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-1995131	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 PIPPIN, LAURETTA J 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, if Applicable) City FL Zip Code

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

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

U00000543393
05/10/06-80137-003 508.75

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 #	598978
NAME	ROYAL AMERICAN DEVELOP.
STREET ADDRESS	1002 W. 23RD ST., #400
CITY-ST-ZIP	PANAMA CITY, FL
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	

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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 4/20/06 (850) 769-8981
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE