

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

DOCUMENT # A10718 1. Entity Name COLLEGE ARMS APARTMENTS PHASE II, LTD.		 Secretary of State	
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 Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
		04132005 Chg-LP CR2E003 (10/03)	
		4. FEI Number 59-2101239	
		5. Certificate of Status Desired <input 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, 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 _____ <small>Signature, typed, or printed name of registered agent and title if applicable</small>			
9. Capital Contributions as Shown on record. \$100.00		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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	598978	STREET ADDRESS	
NAME	ROYAL AMERICAN DEVEL INC	CITY - ST - ZIP	
STREET ADDRESS	1002 W. 23RD ST., #400		
CITY - ST - ZIP	PANAMA CITY FL,		
DOCUMENT #		STREET ADDRESS	
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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:		Lauretta J. Pippin, Secretary 4/25/05 (850) 769-8981	