2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT #A11511

1. Entity Name

PINE MEADOW APARTMENTS, LTD.



FILED Apr 28, 2006 08:00 AN 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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

 01102006 No Chg-LP
 CR2E003 (11/05)

 4. FEI Number
 Appfied For Not Applicable

 59-2140434
 Not Applicable

 5. Codificate of Status Parishd
 \$8.75 Additional

5. Certificate of Status Desired Pee Required

7. Name and Address of New Registered Agent

PIPPIN, LAURETTA J 1002 W. 23RD ST. SUITE 400 PANAMA CITY, FL 32405 Name

Street Address (P.O. BDO on NOT cep WIRITE IN THIS SPACE

City

Zip Code

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

05/10/06-80140-014 508.75

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

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.

GENERAL PARTNER INFORMATION 113.

ADDRESS CHANGES ONLY

12.	GENERAL PARTNER INFORMATION	13.
DOCUMENT#	598978	STREET ADDRESS
NAME	ROYAL AMER. DEV. INC.	
STREET ADDRESS	1002 111 201 12 0 11, 11 10 1	C11Y-S1-21P
CITY-ST-ZIP	PANAMA CITY, FL	
DOCUMENT #		STREET ADDRESS
NAME	CHAPMAN, JOSEPH F., III	
STREET AODRESS	1002 111 2012 411, 1111	CITY-ST-ZIP
CITY-ST-ZIP	PANAMA CITY, FL	
DOCUMENT #		STREET ADDRESS
NAME		CHIEST NO STREET
STREET ADDRESS		CITY-ST-ZIP
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DOCUMENT #		STREET ADDRESS
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DOCUMENT #		STREET ADDRESS
Name		0.112211201200
STREET ADDRESS		CITY-ST-2/P
CITY-ST-ZIP		
DOCUMENT #		STREET ADDRESS
NAME		STREET ADDITION
STREET ADDRESS		CHTY+ST-ZIP
CITY-ST-ZIP		OHT OLD AP
14 I hereby cedify that the information symplified with this filling does not qualify for the exemptions of		

SIGNATURE AND TYPED OR PR

DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling 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 enhancement of the propert as required by Chapter 620, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

Lauretta J. Pippin. Secretary

4/20/06

(850) 769-8981

Date Daytime Phone #