

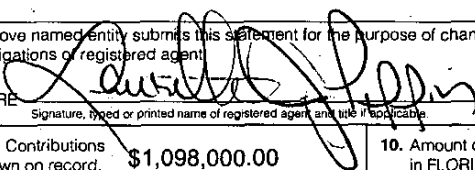
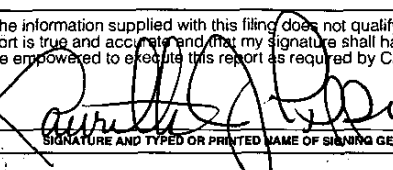


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A11512 1. Entity Name SAND DUNES 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	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
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. 23 rd 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 DATE: 4/22/04					
9. Capital Contributions as Shown on record. \$1,098,000.00		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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	598978		STREET ADDRESS		
NAME	ROYAL AMER. DEV., INC.		CITY-ST-ZIP		
STREET ADDRESS	1002 W. 23RD ST., #400				
CITY-ST-ZIP	PANAMA CITY, FL				
DOCUMENT #			STREET ADDRESS		
NAME	CHAPMAN, JOSEPH F., III		CITY-ST-ZIP		
STREET ADDRESS	1002 W. 23RD ST., #400				
CITY-ST-ZIP	PANAMA CITY, FL				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
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NAME			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:  Lauretta J. Pippin, Secretary <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Date: 4/22/04		Daytime Phone #: (850) 769-8981

FILED

04 APR 30 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01122004 Chg-LP CR2E003 (10/03)

4. FEI Number **59-2140407** Applied For ☐ Not Applicable ☒

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

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