2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

DOCUMENT # A12149 DIXIÉ GROVE APARTMENTS, LTD. 04 APR 30 AM 8: 09 SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 1002 W. 23RD ST., SUITE 400 1002 W. 23RD ST., SUITE 400 PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072004 CR2E003 (10/03) Chg-LP Applied For City & State City & State 4. FEI Number 59-2164070 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Lauretta J. Pippin HENRY, ROBERT F. Street Address (P.O. Box Number is Not Acceptable) 1002 W. 23RD ST. SUITE 400 1002 W. 23rd St., Ste, 400 PANAMA CITY, FL 32405 Panama City 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 epistered appril. Lauretta J. Pippin 9. Capital Contributions \$418,300.00 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. ADDRESS CHANGES ONLY 12. GENERAL PARTNER INFORMATION DOCUMENT # 598978 STREET ADDRESS ROYAL AMERICAN DEVELOPMENT, INC. NAME STREET ADDRESS 1002 W. 23RD ST., #400 CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY, FL DOCUMENT # STREET ADDRESS NAME SOUTHERN COASTAL MORTGAGE COMPANY 300036062: STREET ADDRESS 1002 W. 23RD ST., #400 CITY-ST-ZIP CITY-ST-7iP PANAMA CITY, FL DOCUMENT # STREET ADDRESS NAME CHAPMAN, JOSEPH F III STREET ADDRESS 1002 W. 23RD ST., #400 CITY-ST-7IP CITY-ST-ZIP PANAMA CITY, FL DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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 Lauretta J. Pippin, Secretary 4/22/04 (850) 769-8981 SIGNATURE: ED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone