


# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0000119 AV

**DOCUMENT # A12702**

1. Entity Name  
**PINELAND APARTMENTS, LTD.**



**FILED**

03 MAY -2 AM 9:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

**DUE BY MAY 1, 2003**

City & State

4. FEI Number **59-2202484**

Applied For  
Not Applicable

City & State

Zip Country

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

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**HENRY, ROBERT F., III**  
**1002 W. 23RD ST.**  
**SUITE 400**  
**PANAMA CITY FL 32405**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$21,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

**11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION**

**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**  
NAME **ROYAL AMER. DEVEL., INC**  
STREET ADDRESS **1002 W. 23RD ST., #400**  
CITY-ST-ZIP **PANAMA CITY FL**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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:**  **Laretta J. Pippin, Asst. Sec. 4/28/03 (850)769-8981**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CR2E003 (10/02)

SAMPLE CHECK HERE