2006 LIMITED PARTNERSHIP ANNUAL REPORT

FILED Apr 28, 2006 08:00 AN Secretary of State

Applied For

Not Applicable

Due by may 1, 2000		
DOCUMENT # A12704 1. Entity Name ABBEWOOD 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	-



DO NOT WRITE IN THIS SPACE

01102006 No Chg-LP CR2E003 (11/05)

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

4. FEI Number 59-2202477

7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. BDO be NICATopWIRITE PIPPIN, LAURETTA J 1002 W. 23RD ST. SUITE 400 IN THIS SPACE PANAMA CITY, FL 32405 Zip Code 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 registered agent. Signature, typed or printed name of registered agent and little if applicable DATE 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 ADDRESS CHANGES ONLY 12. 598978 DOCUMENT # STREET ADDRESS ROYAL AM. DEVELOPMENT, INC NAME STREET ADDRESS 1002 W. 23RD ST., #400 CITY-ST-ZIP CHY-ST-ZIP PANAMA CITY, FL DOCUMENT # STREET ADDRESS NAME STREET ADDRESS H00000541914 05/10/06-80079-004 508.75 CHY-ST-ZIP GITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME DO NOT WRITE STREET ADDRESS CITY-ST-7P CITY-ST-ZIP IN THIS SPACE DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **©CUMENT #** STREET ADDRESS NAME STREET ADDRESS City-St-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS

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 rule 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 employered to accurate this report as required by Chapter 620, Florida Statutes

CITY- ST ZIP

SIGNATURE:

CHY-ST-ZIP

GOENERAL PARTNER

Lauretta J. Pippin, Secretary

4/20/06

Date

(850) 769-8981

Daytime Phone #