

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

**DOCUMENT # A23211**

1. Entity Name  
**RIDGE VIEW 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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01092004

Chg-LP

CR2E003 (10/03)

4. FEI Number

**59-2695879**

Applied For

Not Applicable

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  
**Lauretta J. Pippin**

Street Address (P.O. Box Number is Not Acceptable)

**1002 W. 23<sup>rd</sup> 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*  
 Signature, typed or printed name of registered agent and title if applicable.

**Lauretta J. Pippin**

4/22/04

DATE

9. Capital Contributions  
 as Shown on record.

**\$312,000.00**

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

STREET ADDRESS

CITY-ST-ZIP

**100036062991**  
**05/11/04--01066--033 \*\*\$35.00**

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:**

*Lauretta J. Pippin*  
 Signature and typed or printed name of signing general partner

**Lauretta J. Pippin, Secretary**

4/22/04

Date

(850) 769-8981

Daytime Phone #

STAPLE CHECK HERE

**FILED**

04 APR 30 AM 8:12

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

