2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

DOCUMENT: # A25568 04 APR 30 AM 8:08 BLAIRSTONE APARTMENTS, PHASE II, LTD. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1002 W. 23RD ST., #400 1002 W. 23RD ST., #400 PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01062004 Chg-LP CR2E003 (10/03) 4. FEI Number Applied For City & State City & State 59-2860916 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Lauretta J. Pippin HENRY, ROBERT F. III 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 Zip Code 2405 Fl Panama City The above named entity submits this st the obligations of registered apent. urpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 4/22/04 Lauretta J. Pippin SIGNATURE 9. Capital Contributions Amount of Capital Contributions \$1,305,000.00 as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. DOCUMENT # 598978 STREET ADDRESS ROYAL AMERICAN DEV., INC. NAME 1002 W. 23RD ST., #400 STREET ADDRESS CITY-ST-ZIP 700036080007 CITY-ST-ZIP PANAMA CITY, FL 05/12/04--01016--013 **535.00 DOCUMENT # 695060 STREET ADDRESS NAME ITC HOLDINGS, INC STREET ADDRESS 1002 W. 23RD ST., #400 CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY, FL DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME 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 employee to execute this report as required by Chapter 620, Florida Statutes Lauretta J. Pippin, Secretary 4/22/04 (850) 769-8981 SIGNATURE

Daytime Phone #

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