FIL	EĎ≀	535.00

DOCUMENT #

A92000000221

1. Entity Name

SAN JOSE APARTMENTS OF SEMINOLE, LTD.

Principal Place of Business

PANAMA CITY FL 32405

Mailing Address

1002 WEST 23RD STREET, SUITE 400

1002 WEST 23RD STREET, SUITE 400

PANAMA CITY FL 32405

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State City & State 4. FEI Number Applied For 59-3156130 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HENRY, ROBERT F III Street Address (P.O. Box Number is Not Acceptable) 1002 WEST 23RD STREET, SUITE 400

PANAMA CITY FL 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.

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

(NOT :: Registered Agent signature required when reinstating)

City

9. Capital Contributions as Shown on record.

\$378,017.00

10. Amount of Capital Contributions in FLORIDA to clate.

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

Zip Code

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 ROYAL AMERICAN DEVELOPMENT, INC.	STREET ADDRESS	
STREET ADDRESS	1002 WEST 23RD STREET, SUITE 400 PANAMA CITY FL 32405	CITY-ST-ZIP	<u> </u>
	N43835 BAY EQUITY INVESTMENTS, INC.	STREET ADDRESS	400004243414 8 -05/18/01 01005 001 **45187.20 *****535.00
STREET ADDRESS 538 HARMON AVENUE PANAMA CITY FL 32401	538 HARMON AVENUE	CITY-ST-ZIP	***43[0].20 ******330.00
DOCUMENT / NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	BK
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify fo 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 report as required by Chap er 620, Florida Statutes

SIGNATURE