2003 LIMITED PARTNERSHIP

UNIFORM BUSINESS REPORT (UBR) A94000001225 **DOCUMENT #** 

1. Entity Name HC ASSOCIATES, LTD.



Principal Place of Business 1002 W. 23RD St., STE, 400

Mailing Address 1002 W. 23RD ST., STE. 400

FILED 03 HAY -2 PM 7: 46 SECRETARY OF STATE TALLAHASSEE FLORIDA

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PANAMA CITY FL 32405		PANAMA CITY FL 32405					品付待がおいの	
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2. Principal Place of Business		3. Mailing Address				#111 BB111 #8111 #1	<b>(18)</b> 11818 11814 11881 8111 1881	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DUE BY MAY 1, 2003			
City & Stat	e	City & State			4. FEI Number 59-3265011		Applied For Not Applicable	
Zip	Country	Zip	Zip Count		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent			7. Name and Address of New	Registered #	gent	
HENDY D	OBERT F III			Name			<u> </u>	
1002 W. 2	23RD STREET, SUITE 400			Street Address (P.O. Box Number is Not Acceptable)				
PANAMA	CITY FL 32405				· · · · · · · · · · · · · · · · · · ·		•	
				City		FL	Zìp Code	
	named entity submits this statement fions of registered agent.	or the purpose of changin	g its registere	ed office or regis	stered agent, or both, in the State of F	lorida. I am fa	amiliar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable.				DATE		
9. Capital Contributions as Shown on record. \$1,222,100.00 in FLORIDA to date				outions	1 2 2 2		TO FL. DEPT. OF STATE FEE INFORMATION	
					ISTERED AND ACTIVE WITH THE			
12. GENERAL PARTNER INFORMATION					ADDRESS CHANGES ONLY			
DOCUMENT # NAME	598978 ROYAL AMERICAN DEVELOPMENT, INC.			ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	S 1002 W. 23RD STREET, SUITE 400 PANAMA CITY FL 32405		CITY	-ST-ZIP				
DOCUMENT # NAME			STRE	ET ADDRESS	0000175	1147	<b>4○</b> **535 NA	
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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 papert as required by Chapter 620, Florida Statutes

CITY-ST-ZIP

STREET ADDRESS

**SIGNATURE:** 

DOCUMENT #

CITY-ST-ZIP

NAME STREET ADDRESS

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

Daytime Phone #

CR2E003 (10/02)