## 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (U

DOCUMENT # A9400001334  1. Entity Name ROYAL PALM TOWN CENTER, LTD.  Principal Place of Business 101 PINEAPPLE GROVE WAY DELRAY BEACH FL 33444  2. Principal Place of Business 3. Mailing Address 3. Mailing Address				O3 APR 21 PM 1: 21  SECRETARY OF STATE TABLEATASSEE FLORIDA		! PM 1:21
Suite, Apt. #, etc. Suite, Apt. #, etc.			DUE BY MAY 1, 2003			
City & State City & State			037(03003)		Applied For Not Applicable	
Zip Country	Zip	Country		5. Certificate of	f Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent			
FRICKE, HENRY A ESQ 101 PINEAPPLE GROVE WAY			Name Street Address (P.O. Box Number is Not Acceptable)			
DELRAY BEACH FL 33444						
			City FL Zip Code			
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 ————————————————————————————————————					DATE	
9. Capital Contributions as Shown on record. \$49,000.00 10. Amount of Capital C in FLORIDA to date.			\$10,000.00 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STA		· ·	
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	13.			ADDRESS CHANGES OF		
	P94000071807 ROYAL PALM LAND, INC. 101 PINEAPPLE GROVE WAY DELRAY BEACH FL 33444		ET ADDRESS			
STREET ADDRESS 101 PINEAPPLE GROVE WAY			ST-ZIP			
DOCUMENT / NAME		STREE	T ADDRESS			
STREET ADORESS CITY-ST-ZIP		CITY-	ST-ZIP	Brane Freedy	المراج ال	g very green
DOCUMENT / NAME		STREE	T ADDRESS	04/21/0	<b>01.115.359C</b> 0301008023	**158.75
STREET ADDRESS CITY-ST-ZIP		CITY-	ST-ZIP			
DOCUMENT # NAME		STREE	T ADDRESS		·	
STREET ADDRESS CITY-ST-ZIP		CITY-	ST-ZIP			,
DOCUMENT # NAME		STREE	T ADDRESS			·
STREET ADDRESS CITY-ST-2IP		CITY-	ST-ZIP			
DOCUMENT # NAME		STREE	T ADDRESS			
STREET ADDRESS CITY-ST-ZIP			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  ROYAL PALM JAND INC), a Florida corporation  SIGNATURE:  By SIGNATURE						

STAPLE CHEUN HENE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #