

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A96000000963

1. Entity Name
STONECREEK APARTMENTS OF MOORESVILLE, LTD.



Principal Place of Business
1002 WEST 23RD STREET, SUITE 400
PANAMA CITY, FL 32405

Mailing Address
1002 WEST 23RD STREET, 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

01162004 Chg-LP CR2E003 (10/03)

4. FEI Number
59-3404625

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 WEST 23RD STREET, SUITE 400
PANAMA CITY, FL 32405

Name
Lauretta J. Pippin

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

1002 W. 23rd 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

4/22/04
 DATE

9. Capital Contributions
 as Shown on record. **\$3,135,820.00**

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 DEVELOPMENT, INC.**
 STREET ADDRESS **1002 WEST 23RD STREET, SUITE 400**
 CITY-ST-ZIP **PANAMA CITY, FL 32405**

STREET ADDRESS

CITY-ST-ZIP

800036071348
05/11/04--01088--009 **535.00

DOCUMENT #
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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, Secretary

4/22/04

(850) 769-8981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE

FILED

04 APR 30 AM 8:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

