

**2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2004**

**FILED**

04 APR 30 AM 8:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**DOCUMENT # A96000001627**  
 1. Entity Name  
**BRIARWOOD APARTMENTS OF PC, 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: Suite, Apt. #, etc.  
 3. Mailing Address: Suite, Apt. #, etc.  
 City & State: City & State  
 Zip: Zip Country: Zip Country

01062004 Chg-LP CR2E003 (10/03)

4. FEI Number: **59-3439594**  
 Applied For:  Not Applicable:

5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**HENRY, ROBERT F III  
 1002 WEST 23RD STREET, SUITE 400  
 PANAMA CITY, FL 32405**

7. Name and Address of New Registered Agent  
 Name: **Lauretta J. Pippin**  
 Street Address (P.O. Box Number is Not Acceptable):  
**1002 W. 23<sup>rd</sup> 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* **Lauretta J. Pippin** 4/22/04  
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record: **\$99.00**  
 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

DOCUMENT #	598978
NAME	ROYAL AMERICAN DEVELOPMENT, INC.
STREET ADDRESS	1002 WEST 23RD STREET, SUITE 400
CITY-ST-ZIP	PANAMA CITY, FL 32405
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	000036078840
CITY-ST-ZIP	05/12/04--01014--003 **150.00
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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* **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