## 2008 FOR PROFIT CORPORATION

## **FILED** May 01, 2008 08:00 Al Secretary of State

DOCUMENT # P020 1. Entity Name ROYAL AMERICAN REAL E		
Principal Place of Business	Mailing Address	
1002 W. 23RD STREET SUITE 400 PANAMA CITY, FL 32405	1002 W. 23RD STREET Suite 400 Panama City, Fl. 32405	

DO NOT WRITE IN THIS SPACE



## No Chg-P CR2E034 (11/05) 02122008

03-0467816 5. Certificate of Status Desired 

4/10/08

Date

4. FEI Number

Applied For Not Applicable

\$8.75 Additional

(850) 769-8981

Daylime Phone #

Fee Required

6. Name	and Addres	s of Current	Registered	Agent

PIPPIN, LAURETTA J 1002 W 23 ST. STE. 400 PANAMA CITY, FL 32405

## DO NOT WRITE IN THIS SPACE

the obligations of registered agent.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)  OATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finance     Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000939304 05/28/08-80021-022 150.00		
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN CLEMO, MARY MARIE 1002 W 23RD., STE 400 PANAMA CITY, FL 32405		:				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CHAPMAN, JOSEPH F IV 1002 W 23RD., STE 400 PANAMA CITY, FL 32405			· · · ·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN, KRISTIAN B 1002 W 23RD., STE 400 PANAMA CITY, FL 32405			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN, DAVID M 1002 W 23RD., STE 400 PANAMA CITY, FL 32405			IN <sup>-</sup>	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CLEMO, SCOTT C 1002 W 23RD., STE 400 PANAMA CITY, FL 32405						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PIPPIN, LAURETTA J 1002 W 23RD., STE 400 PANAMA CITY, FL 32405						
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplemental leport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.							

Lauretta J. Pippin, Secretary

FFICER OR DIRECTOR

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