FILED May 22, 2008 8:00 am Secretary of State

2008	FOR PR	OFIT C	DRPOR/	ATION
	ANN	UAL RE	PORT	

DOCUMENT # P93000083972 1. Entity Name ROYAL AMERICAN HOSPITALITY, INC.							05-22-2008	8 90020 (002 ***15	50.00	
Principal Place of Business 1002 W 23RD ST SUITE 400 PANAMA CITY, FL 32405		Mailing Address 1002 W 23RD ST SUITE 400 PANAMA CITY, FL 32405		60043499							
Principal Place of Business - No P.O. Box # 3. Maili		3. Mailing A	Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02122008	Chg-P	CR2E03	34 (12/06)				
City & State		City & State			4. FEI Numb				plied For t Applicable		
Zip		Country	Zip	Zip Coun			5. Certificate	of Status Desired		\$8.75 Add ee Required	
	6. Name	and Address of Current	Registered Age	ent	N	ame	7. Name and	Address of New R	Registered A	gent	
PIPPIN, LAURETTA J 1002 W 23RD ST SUITE 400				Street Address (P.O. Box Number is Not Acceptable)							
PANAMA (CITY, FL	32405				ity				Zip Code	
8. The above	named entit	ly submits this statement fo	or the purpose of	f changing its re			ed agent, or bo	oth, in the State of Flo	FL orida. I am f	,	
the obligat	ions of regis	tered agent.									
SIGNATURE	Signature, typed	Tor printed name of registered agent	and title if applicable.	(NOTE F	Registered Age	int signature required	when reinstabng)		DATE		
FIL After Ma	E NOWIII ay 1, 200	`FEE IS \$150.00 8 Fee will be \$550.	- 1	action Campaignust Fund Contrib			.00 May Be led to Fees				
10.		OFFICERS AND			11.		ADDITIONS	/CHANGES TO OFF	ICERS AND		
HILE NAME	D CHAPMA	N, JOSEPH F III	L	Delete	TITLE NAME					☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	S 1002 W 23RD ST SUITE 400 SIRI			STREET AC							
TITLE	D	•		Delete	TITLE		• •••			Change	Addition
NAME STREET ADDRESS	BARR, JII 1002 W 2	MMY D :3RD ST / STE - 400	/		NAME STREET AL	ODRESS					
CITY-SI-ZIP	1	CITY, FL 32405			CITY-ST-	i					
TITLE NAME	VASD	N IOSEPHEIV	[Delete	TITLE NAME					☐ Change	Addition
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CITY-ST-ZIP		CITY, FL	г	☐ Delele	CITY-ST-	ZiP				Change	Addition
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STREET ADDRESS CITY-ST-ZIP	l	3RD ST / STE - 400 CITY, FL			STREET AL						
IIILE	V		[☐ Delete	THLE					Change	Addition
NAME STREET ADDRESS		SCOTT C BIRD STREET STE 400	า		NAME STREET AL	DORESS					
CITY-ST-ZIP		CITY, FL 32405			CITY-ST-						
TITLE	PT	DOREDT É III		Delete	TITLE NAME					☐ Change	Addition
NAME STREET ADDRESS	1	ROBERT F III 23RD ST STE 400			STREET AL	DDRESS					ļ
CHY-ST-ZIP	l	CITY, FL 32405	h this files d	nat avelle to	CITY-ST-		d in Charter **	O. Elorido Statuta-	I further ac-	ihe that the i-	formation
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report 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 acid fees, with in other like empowered.											
SIGNAT	URE: _	Jack WH		Lau		ppin, Secretar	гу	4/10/08		(850) 769-8	ו אַצּי