

**2014 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B07000000129

**Entity Name:** TRIVEST PARTNERS IV, L.P.

**Current Principal Place of Business:**

550 SOUTH DIXIE HIGHWAY  
#300  
CORAL GABLES, FL 33146

**Current Mailing Address:**

550 SOUTH DIXIE HIGHWAY  
#300  
CORAL GABLES, FL 33146

**FEI Number:** 20-8668476

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**General Partner Detail :**

Document # F07000001986  
Name TRIVEST PARTNERS GPMM, INC.  
Address 550 SOUTH DIXIE HIGHWAY, #300  
City-State-Zip: CORAL GABLES FL 33146

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PHYLLIS G. DENNIS

**ASSISTANT SECRETARY** 02/10/2014

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date