

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A01000001644

**FILED**  
**Mar 24, 2009**  
**Secretary of State**

**Entity Name:** CENTURY - FAIRFIELD VILLAGE, LTD.

**Current Principal Place of Business:**

500 SOUTH FLORIDA AVE., SUITE 700  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**

500 SOUTH FLORIDA AVE., SUITE 700  
LAKELAND, FL 33813

**New Mailing Address:**

**FEI Number:** 65-1159513

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MAXWELL, LAWRENCE T  
500 SOUTH FLORIDA AVE., SUITE 700  
LAKELAND, FL 33813 US

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

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 INFORMATION:**

Document #: G23570  
Name: CRF MANAGEMENT CO., INC.  
Address: 500 SOUTH FLORIDA AVE., SUITE 700  
City-St-Zip: LAKELAND, FL 33813

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: JIM D LEE

VP

03/24/2009

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

\_\_\_\_\_  
Date