

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A95000000200

**FILED**  
**May 07, 2012**  
**Secretary of State**

**Entity Name:** TRAILS ASSOCIATES LIMITED PARTNERSHIP

**Current Principal Place of Business:**

2 GILLON ST., SUITE A  
CHARLESTON, SC 29401

**New Principal Place of Business:**

1742 SAM RITTENBERG BLVD 8A  
CHARLESTON, SC 29407 US

**Current Mailing Address:**

2 GILLON ST., SUITE A  
CHARLESTON, SC 29401

**New Mailing Address:**

P O BOX 31417  
CHARLESTON, SC 29417 US

**FEI Number:** 59-3289032

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WHWW INC  
390 N ORANGE AVE  
SUITE 1500  
ORLANDO, FL 32801 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 #: F93000004313  
Name: HPI PARTNERS III, INC.  
Address: 2 GILLON ST., SUITE A  
City-St-Zip: CHARLESTON, SC 29401

**ADDRESS CHANGES ONLY:**

Address: 1742 SAM RITTENBERG BLVD 8A  
City-St-Zip: CHARLESTON, SC 29407 US

I hereby 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: EDWIN W HARLEY

GP

05/07/2012

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

\_\_\_\_\_  
Date