

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000001641

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Entity Name:** AFFILIATED AMERICAN INNS IV, LTD.

**Current Principal Place of Business:**

475 COMMERCE LAKE DRIVE  
ST. AGUSTINE, FL 32095

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1589  
PONTE VEDRA, FL 32004

**New Mailing Address:**

**FEI Number:** 59-3452636

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHEA, JOHN W  
8100 CYPRESS HOLLOW COURT  
PONTE VEDRA, FL 32004 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 #: P97000057640  
Name: AFFILIATED AMERICAN IV, INC.  
Address: PO BOX 1589  
City-St-Zip: PONTE VEDRA, FL 32004

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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: JOHN W. SHEA

MP

04/17/2012

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

\_\_\_\_\_  
Date