

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A99000000748

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** GAINESVILLE DOWNTOWN INN VENTURE, LTD.

**Current Principal Place of Business:**

111 WEST FORTUNE STREET  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

111 WEST FORTUNE STREET  
TAMPA, FL 33602

**New Mailing Address:**

**FEI Number:** 59-1808241

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CALLEN, ANDRE P  
111 W. FORTUNE STREET  
TAMPA, FL 33602 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 #: P99000042148  
Name: GAINESVILLE DOWNTOWN INN VENTURE, INC.  
Address: 111 WEST FORTUNE STREET  
City-St-Zip: TAMPA, FL 33602

**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: ANDRE P. CALLEN

RA

04/30/2009

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

\_\_\_\_\_  
Date