

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B03000000128

**FILED**  
**Mar 20, 2009**  
**Secretary of State**

**Entity Name:** CHARLOTTE/HVW LIMITED PARTNERSHIP

**Current Principal Place of Business:**

8111 SHELBYVILLE RD.  
LOUISVILLE, KY 40222

**New Principal Place of Business:**

8001 SHELBYVILLE RD.  
LOUISVILLE, KY 40222

**Current Mailing Address:**

8111 SHELBYVILLE RD.  
LOUISVILLE, KY 40222

**New Mailing Address:**

8001 SHELBYVILLE RD.  
LOUISVILLE, KY 40222

**FEI Number:** 59-3452090

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UNDERWOOD, ROBERT L  
5728 MAJOR BLVD SUITE 550  
ORLANDO, FL 32819 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 #: P97000048906  
Name: CHARLOTTE/HVW GP, INC.  
Address: 537 EAST PARK AVE.  
City-St-Zip: ORLANDO, FL 32819

**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: TRACY FARMER

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

03/20/2009

\_\_\_\_\_  
Date