

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Aug 06, 2001 8:00 am  
Secretary of State

08-06-2001 90001 050 \*\*\*550.00

0134175 AT

DOCUMENT # F00000006426

1. Entity Name

HILLHAVEN PROPERTIES, LTD., INC.

Principal Place of Business

501 SOUTH FOURTH AVE., SUITE 140  
LOUISVILLE KY 40202

Mailing Address

501 SOUTH FOURTH AVE., SUITE 140  
LOUISVILLE KY 40202

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

41-1422212

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Carmen Grandinetti, Sr. VP, General Counsel & Sec.

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CEO  
TICOTIN, MARK S  
501 SOUTH FOURTH AVE., SUITE 140  
LOUISVILLE KY 40202 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VS  
GRANDINETTI, CARMIN D  
501 SOUTH FOURTH AVE., SUITE 140  
LOUISVILLE KY 40202 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CD  
WESLEY, J. TIMOTHY  
501 SOUTH FOURTH AVE., SUITE 140  
LOUISVILLE KY 40202 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Sr Vice President & Controller  
Rob Brehl  
501 South Fourth Ave, Ste 140  
Louisville Ky 40202 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
JESSEE, MARK D  
501 SOUTH FOURTH AVE., SUITE 140  
LOUISVILLE KY 40202 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
NEUTEUFEL, WERNER  
501 SOUTH FOURTH AVE., SUITE 140  
LOUISVILLE KY 40202 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Director of Tax  
Renee Coyne  
501 South Fourth Ave, Ste 140  
Louisville Ky 40202 ☐ Change ☒ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carmen Grandinetti

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(502) 719-2628

CR2E034 (5/01)