2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000191

Entity Name: PAH-HVP GENERAL PARTNER CORP.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1950 STEM DALLAS, T	MONS FREE X 75207	WAY, #6001			
Current Mailing Address:			New Mailing Ac	New Mailing Address:	
1950 STEM DALLAS, T	MONS FREE X 75207	WAY, #6001			
FEI Number:	75-2767212	FEI Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Addr	ess of New Registered Agent:	
1200 SOUT	ORATION SYS FH PINE ISLAI ON, FL 33324	ND ROAD			
The above in the State		submits this statement for the p	urpose of changing its reg	istered office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Age	ent	Date	
Election Carr	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KLEISNER, FR	NS FRWY #6001	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SCHROADEN,	NS FRWY #6001	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HENDRICK, JU	NS FRWY #6001	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HIGH, MICHAE	NS FRWY #6001	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CHLOUPEK, M	NS FRWY #6001	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	GOSCH, PHILI	NS FRWY #6001	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK CHLOUPEK SVP 04/30/2007