2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000104846

Address:

City-St-Zip:

3745 WIMBLEY LANE

LEXINGTON, KY 40515

FILED Apr 03, 2009 Secretary of State

Entity Na	me: CVC PR	OPERTIES, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4081 INDIAN BAYOU NORTH DESTINE, FL 32541			4081 INDIAN BAYOL DESTIN, FL 32541	4081 INDIAN BAYOU NORTH DESTIN, FL 32541	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	MBLEY LANE ON, KY 40515	5			
FEI Number	: 02-0633408	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
COLE, BILL 4081 INDIAN BAYOU NORTH DESTINE, FL 32541 US			COLE, BILL 4081 INDIAN BAYOL DESTIN, FL 32541	4081 INDIAN BAYOU NORTH	
	e named entity e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATURE:				04/03/2009	
	Electro	nic Signature of Registered Aç	gent	Date	
Election Ca	mpaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	COLE, BILL) Delete BAYOU NORTH 32541	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (VEITH III, JOH 2105 SHELTO LEXINGTON,	N ROAD	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name:	ST (COLDIRON, J) Delete AMIE	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: JAMIE COLDIRON SEC 04/03/2009