2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A94000001880

FILED May 09, 2011 Secretary of State

Entity Name: WILLIAM R. AND THELMA L. CLONTS FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business: New Principal Place of Business:

1001 GENEVA DRIVE OVIEDO, FL 32765

Current Mailing Address: New Mailing Address:

PO BOX 622916 OVIEDO, FL 327622916

FEI Number: 59-3291461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPEER, THOMAS A 113 MAGNOLIA AVENUE SANFORD, FL 32771 US

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: ADDRESS CHANGES ONLY:

Document #:

Name: CLONTS, W. REX JR.

 Address:
 6265 LAKE CHARM CIRCLE
 Address:

 City-St-Zip:
 OVIEDO, FL 32765
 City-St-Zip:

Document #:

Name: CLONTS, CHARLES L

 Address:
 1249 APACHE DRIVE
 Address:

 City-St-Zip:
 GENEVA, FL 32732
 City-St-Zip:

Document #:

Name: NEEL, JANET C

 Address:
 61 AUBREY ROAD NE
 Address:

 City-St-Zip:
 WHITE, GA 30184
 City-St-Zip:

Document #:

Name: WEST, SUSAN C

 Address:
 4049 HEIRIOOM ROAD PLACE
 Address:

 City-St-Zip:
 OVIEDO, FL 32766
 City-St-Zip:

Document #:

Name: CLONTS, VIVIAN

 Address:
 146 HILLCREST DRIVE
 Address:

 City-St-Zip:
 OVIEDO, FL 32765
 City-St-Zip:

I hereby 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: CHARLES L CLONTS GP 05/09/2011