## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A01000001311

**FILED** Feb 03, 2006 Secretary of State

Entity Name: CLIFFORD NEWSOME FAMILY LIMITED PARTNERSHIP

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

P.O. BOX 129

CLARKSVILLE, FL 32430

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 129 CLARKSVILLE, FL 32430

FEI Number: 59-7221098 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:

BIST, MICHAEL P BIST, MICHAEL P 1300 THOMASWOOD DRIVE 1300 THOMASWOOD DRIVE TALLAHASSEE, FL 32430 TALLAHASSEE, FL 32308

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: 02/03/2006

> Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #:

NEWSOME, CLIFFORD A Name:

10367 N.W. NEWSOME ROAD Address: Address: City-St-Zip: CLARKSVILLE, FL 32430 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

GΡ SIGNATURE: CLIFFORD A. NEWSOME 02/03/2006