

# 2008 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A08000000004

**FILED**  
**Apr 21, 2008**  
**Secretary of State**

**Entity Name:** CLJ II FAMILY LIMITED PARTNERSHIP, L.L.L.P.

**Current Principal Place of Business:**

ONE SARASOTA TOWER 2 NORTH TAMIAMI TRAIL  
STE 306  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

1304 DESOTO AVE STE 404  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEICH, RAY  
1304 DESOTO AVE STE 404  
TAMPA, FL 33606 US

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

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:**

Document #:

Name: JONES, CLIFFORD L  
Address: 1304 DESOTO AVE STE 404  
City-St-Zip: TAMPA, FL 33606

Document #:

Name: JONES, LINDA  
Address: 1304 DESOTO AVE STE 404  
City-St-Zip: TAMPA, FL 33606

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

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 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: CLIFFORD L JONES

\_\_\_\_\_  
Electronic Signature of Signing General Partner

04/21/2008

\_\_\_\_\_  
Date