

# 2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A08000000004

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

1304 DESOTO AVE  
SUITE 404  
TAMPA, FL 33606

**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

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

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

Address:  
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: CLIFFORD L JONES

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

04/20/2010

\_\_\_\_\_ Date