

**2012 LIMITED PARTNERSHIP ANNUAL REPORT**

**FILED  
Apr 25, 2012  
Secretary of State**

DOCUMENT# A08000000004

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

**Current Principal Place of Business:**

704 WEST BAY STREET  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

704 WEST BAY STREET  
TAMPA, FL 33606

**New Mailing Address:**

FEI Number: 20-8358324      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEICH, RAY  
704 WEST BAY STREET  
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: 704 WEST BAY STREET  
City-St-Zip: TAMPA, FL 33606

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:  
Name: JONES, LINDA  
Address: 704 WEST BAY STREET  
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 JONES

MGR

04/25/2012

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

\_\_\_\_\_  
Date