

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 09, 2007 08:00 AM
Secretary of State

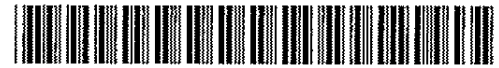
DOCUMENT # A94000001845

1. Entity Name
CLARY FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**% GREGORY J. PORGES, ESQUIRE
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205**

Mailing Address
**P.O. BOX 9320
BRADENTON, FL 34206**



01052007 No Chg-LP

CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0540534

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PORGES, GREGORY J
%PORGES HAMLIN KNOWLES PROUTY, ET AL, P.A.
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

U00000580316

01/10/07-80042-008 500.00

DATE

**FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**ANDRAE, ESTAH
1417 TOLLY GANLY CIRCLE
ORANGEBURG, SC 29115**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**FELDER, FREDDY JR
3055 BRAGG BLVD.
ORANGEBURG, SC 29115**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**PORGES, GREGORY J
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Gregory J. Porges

1/5/07

(941) 748-3770

Date

Daytime Phone #

STAPLE CHECK HERE