

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A94000001880

**FILED**  
**Apr 20, 2009**  
**Secretary of State**

**Entity Name:** WILLIAM R. AND THELMA L. CLONTS FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1001 GENEVA DRIVE  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 622916  
OVIEDO, FL 327622916

**New Mailing Address:**

**FEI Number:** 59-3291461

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPEER, THOMAS A  
113 MAGNOLIA AVENUE  
SANFORD, FL 32771 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 #: G06093900224  
Name: CLONTS ESTATE REDUCATION TRUST  
Address: 1001 GENEVA DRIVE  
City-St-Zip: OVIEDO, FL 32765

**ADDRESS CHANGES ONLY:**

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: C. LEE CLONTS

TTE

04/20/2009

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

\_\_\_\_\_  
Date