

2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A94000001880

FILED
May 09, 2011
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 #:

Name: CLONTS, W. REX JR.
Address: 6265 LAKE CHARM CIRCLE
City-St-Zip: OVIEDO, FL 32765

Address:
City-St-Zip:

Document #:

Name: CLONTS, CHARLES L
Address: 1249 APACHE DRIVE
City-St-Zip: GENEVA, FL 32732

Address:
City-St-Zip:

Document #:

Name: NEEL, JANET C
Address: 61 AUBREY ROAD NE
City-St-Zip: WHITE, GA 30184

Address:
City-St-Zip:

Document #:

Name: WEST, SUSAN C
Address: 4049 HEIRIOOM ROAD PLACE
City-St-Zip: OVIEDO, FL 32766

Address:
City-St-Zip:

Document #:

Name: CLONTS, VIVIAN
Address: 146 HILLCREST DRIVE
City-St-Zip: OVIEDO, FL 32765

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: CHARLES L CLONTS

GP

05/09/2011

Electronic Signature of Signing General Partner

Date