## 2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2007**

## DOCUMENT # A96000000237

CLARKSON FAMILY PARTNERSHIP, LLLP



Principal Place of Business

6220 S. ORANGE BLOSSOM TRAIL,

SUITE 100

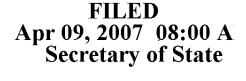
ORLANDO, FL 32809

Mailing Address

6220 S. ORANGE BLOSSOM TRAIL,

SUITE 100

ORLANDO, FL 32809





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03212007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3361314 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CLARKSON, RICHARD D 6220 S. ORANGE BLOSSOM TRAIL, STE, 100 ORLANDO, FL 32809

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	named entity tubmits this statement for the purpose of changing its regitions of registered agent.	istered office or regis		both, in the State o	of Florida. 1 am fami 3 -21-0	liar with, and accept	
Signature, wheel is printed name or egistered agent and title it applicable				DATE			
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.0	o = ··	·	04/18/	000696521 07-800 <u>02-0</u>	05 500.00	
	A GENERAL PARTNER THAT IS A BUSINESS ENTIT NOTE: General Partners MAY NOT be changed on the f					r.	
12.	GENERAL PARTNER INFORMATION						
DOCUMENT ≠			4		2 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
NAME	CLARKSON, RICHARD D			<b>t</b>	r ·	, '	
STREET ADDRESS	6220 S. ORANGE BLOSSOM TRAIL, STE. 100			•			
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#### City SI-ZIP ORLANDO, FL 32809 DOCUMENT # STREET ADDRESS CITY - ST - ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-7IP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT A STREET ACCINESS CITY-ST-ZIP DOCUMENT . NAME STREET ADDRESS CHY-SE ZIP

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Hillis filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information not by signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership highestones required by Chapter 620, Florida Statutes 14. I hereby certify that the information supplied with indicated on this report is true or the receiver or trustee empa

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER