

2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A96000001637

FILED
Apr 07, 2009
Secretary of State

Entity Name: CLYDE BASS FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

P.O. BOX 140817
GAINESVILLE, FL 326082555

New Principal Place of Business:

7105 SW 107 AVENUE
GAINESVILLE, FL 32608

Current Mailing Address:

P.O. BOX 140817
GAINESVILLE, FL 326082555

New Mailing Address:

P.O. BOX 140817
GAINESVILLE, FL 32617 08

FEI Number: 59-3405681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, TOM W
10 N. COLUMBIA STREET
LAKE CITY, FL 32056 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: ELIZABETH BOLTON POST

Address: P.O. BOX 140817

City-St-Zip: GAINESVILLE, FL 32614

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: ELIZABETH B. BOLTON

GP

04/07/2009

Electronic Signature of Signing General Partner

Date