


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**May 06, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A98000001430</b> 1. Entity Name <b>MCCLURE FAMILY LIMITED PARTNERSHIP</b>	
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Principal Place of Business  
**700 EAST SANDPIPER STREET  
APOPKA, FL 32712**

Mailing Address  
**P.O. BOX 1010  
APOPKA, FL 32704-1010**



**DO NOT WRITE IN THIS SPACE**

04252006 No Chg-LP

CR2E003 (11/05)

4. FEI Number  
**59-3525900**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**5. Name and Address of Current Registered Agent**

**MCCLURE, GEORGE G  
700 EAST SANDPIPER STREET  
APOPKA, FL 32712**

**DO NOT WRITE  
IN THIS SPACE**

6. 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

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2006, Fee will be \$900.00**

DATE  
**000000541646  
15/10/06-80066-006 500.00**

**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 # **P87000058918**  
NAME **FLAME VINE, INC.**  
STREET ADDRESS **700 EAST SANDPIPER STREET**  
CITY-ST-ZIP **APOPKA, FL 32712**

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IN THIS SPACE**

STAPLE CHECK HERE

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: *Nancy B. McClure*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*04/24/06*

Date

*407-814-8986*

Daytime Phone #