

# 2007 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000001430

**FILED**  
**Apr 17, 2007**  
**Secretary of State**

**Entity Name:** MCCLURE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

700 EAST SANDPIPER STREET  
APOPKA, FL 32712

**New Principal Place of Business:**

1996 TOURNAMENT DR.  
APOPKA, FL 32712

**Current Mailing Address:**

P.O. BOX 1010  
APOPKA, FL 327041010

**New Mailing Address:**

1996 TOURNAMENT DR.  
APOPKA, FL 32712

**FEI Number:** 59-3525900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

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

MCCLURE, JOHN PETER  
5325 SUMMERLIN RD.  
PORT ST. LUCIE, FL 34987 US

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: JOHN PETER MCCLURE

04/17/2007

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #: P97000058916  
Name: FLAME VINE, INC.  
Address: 700 EAST SANDPIPER STREET  
City-St-Zip: APOPKA, FL 32712

**ADDRESS CHANGES ONLY:**

Address: 1996 TOURNAMENT DR.  
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN PETER MCCLURE

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04/17/2007

Electronic Signature of Signing General Partner

Date