

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 MAY -6 AM 8:42

DOCUMENT # A99000002102

1. Entity Name
 CLAYTON INVESTMENTS, LTD.



Principal Place of Business
 1065 MAITLAND CENTER COMMONS BLVD
 MAITLAND, FL 32751

Mailing Address
 1065 MAITLAND CENTER COMMONS BLVD
 MAITLAND, FL 32751



2. Principal Place of Business - No P.O. Box #

3. Mailing Address
 5405 DIPLOMAT CIRCLE

Suite, Apt. #, etc.
 SUITE 100

04282008 Chg-LP CR2E003 (12/06)

City & State
 ORLANDO, FL

4. FEI Number
 59-3614370

Applied For
 Not Applicable

Zip Country
 32810 USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CLAYTON, KENNETH M
 1065 MAITLAND CENTER COMMONS BLVD.
 MAITLAND, FL 32751

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00

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 05/09/08--01008--011 **505.00

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 #	L99000008864
NAME	WMC MANAGEMENT, LLC
STREET ADDRESS	5405 DIPLOMAT CIRCLE, SUITE 100
CITY-ST-ZIP	ORLANDO, FL 32810
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
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CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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: *Kenneth M. Clayton* Kenneth M. Clayton AS MEMBER OF WMC MANAGEMENT, GENERAL PARTNER
 Date: 4/29/08 Daytime Phone #: 875-2655 407