

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # B07000000198

1. Entity Name
TGC CLERMONT ASSOCIATES LP



SECRETARY OF STATE
 DIVISION OF CORPORATIONS

08 JUL -9 AM 10:33

Principal Place of Business
**777 SOUTH FLAGLER DRIVE
 C/O GOODMAN COMPANY
 WEST PALM BEACH, FL 33401**

Mailing Address
**777 SOUTH FLAGLER DRIVE
 C/O GOODMAN COMPANY
 WEST PALM BEACH, FL 33401**

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04232008

Chg-LP

CR2E003 (12/06)

4. FEI Number

26-0439861

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHEWALTER, WILLIAM A
 777 SOUTH FLAGLER DRIVE
 C/O GOODMAN COMPANY
 WEST PALM BEACH, FL 33401**

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

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

DATE

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

**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

13. ADDRESS CHANGES ONLY

DOCUMENT # **L06000039114**
 NAME **TGC CLERMONT ASSOCIATES GP LLC**
 STREET ADDRESS **777 SOUTH FLAGLER DRIVE**
 CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

STREET ADDRESS **700132637477**
 CITY-ST-ZIP **07/03/08--01036--001 **143.75**

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP **FF \$500
 05/30/08--80048--015 **508.75**

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP **300132637333
 05/30/08--80048--015 **508.75**

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 CITY-ST-ZIP

STREET ADDRESS
 CITY-ST-ZIP

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 registered office of the partnership, and I am a general partner of Goodman Properties Inc., its manager

SIGNATURE: *William A. Shewalter*
William A. Shewalter, Vice President
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

April 24, 2008

561-833-3777

Date

Daytime Phone #