


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

**FILED
May 01, 2007 08:00 AM
Secretary of State**

DOCUMENT # A02000000286
1. Entity Name
HORSE CREEK PROPERTIES, LLLP



Principal Place of Business Mailing Address
**3001 TAMiami TRAIL NORTH, SUITE 207
NAPLES, FL 34103** **3001 TAMiami TRAIL NORTH, SUITE 207
NAPLES, FL 34103**

DO NOT WRITE IN THIS SPACE



03212007 No Chg-LP CR2E003 (12/06)

4. FEI Number 03-0400680	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PERKOVICH, JOSEPH I
THE COLLIER FAMILY OFFICE
3001 TAMiami TRAIL NORTH, STE. 207
NAPLES, FL 34103**

DO NOT WRITE IN THIS SPACE

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, 2007, 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

DOCUMENT #	P97000095461
NAME	PJC & ASSOCIATES, INC.
STREET ADDRESS	3001 TAMiami TRAIL NORTH, SUITE 207
CITY-ST-ZIP	NAPLES, FL 34103
DOCUMENT #	
NAME	
STREET ADDRESS	
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U00000752612
05/21/07-80023-004 500.00

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: *[Handwritten Signature]* VP 4/11/07 239-435-1122

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #