2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 11, 2007 08:00 A
Secretary of State

DOCUMENT # A95000001251

1. Entity Name
H. B. ASSOCIATES OF THE TREASURE COAST, LTD.

Principal Place of Business	Mailing Address
3766 SE OCEAN BLVD., SUITE 102 STUART, FL 34996	3766 SE OCEAN BLVD., SUITE 102 STUART, FL 34996

DO NOT WRITE IN THIS SPACE

03192007 No Chg-LP CR2E003 (12/06)

4. FEI Number
65-0603776

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, WM. FRED
3766 SE OCEAN BLVD, SUITE 102
STUART, FL 34996

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

U00000701052
04/20/07-80041-010 500.00

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 #	P95000057313
NAME	JUL-JAC, INC.
STREET ADDRESS	3766 SE OCEAN BLVD
CITY-ST-ZIP	STUART, FL 34996
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

DO NOT WRITE 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: _____ 4/9/07 772-219-0910
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #