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

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # A97000002049**

1. Entity Name

HOPKINS CROSSING, LTD.



**FILED** Mar 23, 2007 08:00 A Secretary of State

Principal Place of Business

1601 BELVEDERE ROAD, SUITE 407-S WEST PALM BEACH, FL 33406

Mailing Address

1601 BELVEDERE ROAD, SUITE 407-S WEST PALM BEACH, FL 33406



02152007 No Chg-LP

CR2E003 (12/06)

4. FEI Number		Applied For
65-0785821		Not Applicable
5. Certificate of Status Desired	\$8.75	Additional

6. Name and Address of Current Registered Agent

	AUL VEDERE ROAD, SUITE 407-S LM BEACH, FL 33406	DO NOT WRITE IN THIS SPACE
	tions of registered agent.	ts registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
	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 \$90 A GENERAL PARTNER THAT IS A BUSINESS E	DO.00  NOTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
12.	NOTE: General Partners MAY NOT be changed on GENERAL PARTNER INFORMATION	the form; an amendment must be filed to change a general partner.
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P97000082235 HOPKINS CROSSING, INC. 1601 BELVEDERE ROAD, SUITE 407-S WEST PALM BEACH, FL 33406	
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		"U00000677005 03/30/07-80094-023 500.00
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
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DOCUMENT / NAME STREET ADDRESS		

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:

STAPLE CHECK HERE