

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Mar 31, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A00000001574**

1. Entity Name  
**HKS INVESTMENTS, LTD.**



Principal Place of Business  
**536 BUTLER ST.**  
**WINDERMERE, FL 34786**

Mailing Address  
**P.O. BOX 122**  
**WINDERMERE, FL 34786**



**DO NOT WRITE IN THIS SPACE**

03232006 No Chg-LP CR2E003 (11/05)

4. FEI Number **59-3676784** Applied For  Not Applicable   
 5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**STRUBE, STEPHEN K**  
**2814 SILVER STAR ROAD.**  
**ORLANDO, FL 32808**

**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 *Stephen K. Strube*  
Signature, typed or printed name of registered agent and title if applicable

3/29/06  
DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, 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 #	
NAME	<b>STRUBE, STEPHEN K</b>
STREET ADDRESS	<b>P.O. BOX 122</b>
CITY-ST-ZIP	<b>WINDERMERE, FL 34786</b>
DOCUMENT #	
NAME	<b>STRUBE, CYNTHIA P</b>
STREET ADDRESS	<b>P.O. BOX 122</b>
CITY-ST-ZIP	<b>WINDERMERE, FL 34786</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000004858E4  
 04/13/06-00012-015 500.00

**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: *Stephen K. Strube*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/29/06  
Date

(407) 876-5287  
Daytime Phone #