


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

**FILED**  
**Apr 09, 2007 08:00 A**  
**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
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State	4. FEI Number 59-3676784	Applied For Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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03272007 Chg-LP CR2E003 (12/06)

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
STRUBE, STEPHEN K 2814 SILVER STAR ROAD. ORLANDO, FL 32808		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 \_\_\_\_\_ 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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	STRUBE, STEPHEN K	STREET ADDRESS	
NAME	P.O. BOX 122	CITY-ST-ZIP	
STREET ADDRESS	WINDERMERE, FL 34786		
CITY-ST-ZIP			
DOCUMENT #	STRUBE, CYNTHIA P	STREET ADDRESS	000000696754
NAME	P.O. BOX 122	CITY-ST-ZIP	04/18/07-80010-018 500.00
STREET ADDRESS	WINDERMERE, FL 34786		
CITY-ST-ZIP			
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STREET ADDRESS			
CITY-ST-ZIP			

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 STEPHEN K. STRUBE 4/5/07 (407) 876-5282  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #