


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

F.I.L.L.
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

08 APR 22 AM 9:59

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



03242008 No Chg-LP CR2E003 (12/06)

4. FEI Number
 59-3676784

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

STRUBE, STEPHEN K
~~2014 SILVER STAR ROAD.~~ 536 BUTLER ST.
~~ORLANDO, FL 32008~~ WINDERMERE, FL
~~P.O. BOX 122~~ WINDERMERE, FL 34786
 WINDERMERE, FL 34786

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 DATE 3/28/08

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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 | STREET ADDRESS | CITY-ST-ZIP |
| | STRUBE, STEPHEN K | P.O. BOX 122 | WINDERMERE, FL 34786 |
| DOCUMENT # | NAME | STREET ADDRESS | CITY-ST-ZIP |
| | STRUBE, CYNTHIA P | P.O. BOX 122 | WINDERMERE, FL 34786 |
| DOCUMENT # | NAME | STREET ADDRESS | CITY-ST-ZIP |
| DOCUMENT # | NAME | STREET ADDRESS | CITY-ST-ZIP |
| DOCUMENT # | NAME | STREET ADDRESS | CITY-ST-ZIP |

100123068474
 04/11/08--01046--008 **\$500.00

DO NOT WRITE IN THIS SPACE

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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 DATE 3/28/08 DAYTIME PHONE # (407)876-5282

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE

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