

**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 14, 2007**


FILED

2007 AUG -8 AM 10: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A93000000095

1. Entity Name
HICKS INVESTMENTS LTD.



Principal Place of Business 3800 WASHINGTON ROAD, #401 WEST PALM BEACH, FL 33405-2369	Mailing Address 3800 WASHINGTON ROAD, #401 WEST PALM BEACH, FL 33405-2369
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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 65-0395746	Applied For Not Applicable
Zip	Country	Zip	Country



07302007 Chg-LP CR2E003 (12/06)

6. Name and Address of Current Registered Agent

HICKS, H. S
3800 WASHINGTON ROAD, #401
WEST PALM BEACH, FL 33405-2369

7. Name and Address of New Registered Agent

Name Steve Barry
Street Address (P.O. Box Number is Not Acceptable)
222 Lakeview Ave #1630
City West Palm Beach **FL** Zip Code 33401

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 Stu Hicks DATE 7/30/07
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$900.00
On or after September 14, 2007, Fee will be \$1000.00**

**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 # NAME STREET ADDRESS CITY-ST-ZIP	HICKS, H S TRUSTEE 3800 WASHINGTON ROAD, #401 WEST PALM BEACH, FL 334052369	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	PHILIPS, LORI 112 PARK AVENUE BREVARD, NC 28712	STREET ADDRESS CITY-ST-ZIP	000108403460 08/22/07--01009--003 **900.00
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	ECHAVE, LESLIE 3453 CEDARWOOD TRAIL TALLAHASSEE, FL 32312	STREET ADDRESS CITY-ST-ZIP	
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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: Stu Hicks DATE 7/30/07 DAYTIME PHONE # 501-804-0083
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER