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

## FILED **DOCUMENT # A94000001737** 07 MAY 18 PM 4: 10 1. Entity Name HIDDEN CREEK VILLAS, LTD. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 800 NORTH HIGHLAND AVE., SUITE 200 707 MENDHAM BLVD., STE. 201 ORLANDO, FL 32803 ORLANDO, FL 32825 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04062007 Chg-LP CR2E003 (12/06) City & State 4. FEI Number Applied For City & State 59-3291011 Not Applicable Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent OUIS E. 1047 LAGER, JILL Street Address (P.O. Box Number is Not Acceptable) 1665 PALM BEACH LAKES BLVD., STE. 400 WEST PALM BEACH, FL 33401 707 MENOHAM BLVD. STE 20, MELANDO changing its egistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement the obligations of registered agent 84/091 Signature, typed or printed hame 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 ADDRESS CHANGES ONLY DOCUMENT # L06000069617 500103627915 STREET ADDRESS NAME BRM HIDDEN CREEK LLC 15/31/07--01048--011 STREET ADDRESS 707 MENDHAM BLVD., STE, 201 CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32825 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP Cf(Y-57-7)P DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CETY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this fiting 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 occurate and that my eignature shall have the same legal effect as if made under eath; 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 04/09/07

DUISE. YOUT, NER