2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

1. Entity Nam	MENT # A9500000 ČREEK, LTD.	00584		FILEC 07 JUIN-1 AM		
3645 BONITA	cipal Place of Business Mailing Address 15 BONITA BEACH RD #3 P.O. BOX 369 IITA SPRINGS, FL 34134 BONITA SPRINGS, FL 34133-0		0369	SECRETARY OF TALLAHASSEE, F	STATE LORIDA	
				04272007 No Chg-LP CR2	E003 (12/06)	
				4. FEI Number 65-0546267 5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent						
ERDMAN, GREG Charles J. Erdman, JR. 3645 BONITA BEACH ROAD #3						
	PRINGS, FL 34134	_				
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 edisfered agent. SIGNATURE 4/30/97						
0.0	Signesure, 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						
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	P95000020775 J C HOUSING, INCORPORAT 3645 BONITA BEACH RD., SV BONITA SPRINGS, FL 34134	NSTE 3				
OOCLIMENT / NAME STREET ADDRESS	BONITA SPRINGS, PL 34134	;				
CITY-ST-ZIP DOCUMENT /	Y-ST-ZIP			300104123413 06/08/0701038010 **508.75		
STREET ADDRESS CITY-ST-ZIP						
DOCUMENT / NAME STREET ADDRESS						
CITY-ST-ZIP						
NAME STREET ADORESS						
DOCUMENT # DOCUMENT # NAME STREET ADDRESS CITY_ST-ZIP		Sa				
14., I hereby indicated or the rec	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					
SIGNAT	SIGNATURE: 4/30/07					
	SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING GENERAL PARTNER / Ditto Daysme Phone #					