

**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

DOCUMENT # A00000000909
1. Entity Name
DEBUYS PROPERTY INVESTMENT GROUP, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAY 26 AM 9:15

Principal Place of Business: 11 SENECA ROAD, SEA RANCH LAKES FL 33308
Mailing Address: 11 SENECA ROAD, SEA RANCH LAKES FL 33308



2. Principal Place of Business: 7965 Lantana Road
3. Mailing Address: P. O. Box 540669
Suite, Apt. #, etc.

Handwritten initials

1ST MOORE CR2E003 (10/04)

City & State: Lake Worth, FL 33467
City & State: Lake Worth, FL 33454
Zip: 33467 Country: US Zip: 33454 Country: US

4. FEI Number: 65-0097986
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
FRANZ, MANFRED
11 SENECA ROAD
SEA RANCH LAKES FL 33308

7. Name and Address of New Registered Agent
Name: Gary Smigiel, L.C.
Street Address (P.O. Box Number is Not Acceptable): 7965 Lantana Road
City: Lake Worth FL Zip Code: 33467

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: *[Signature]* DATE: _____

11. FILE NOW!!! Due by May 1, 2005.
See Block 11 instructions for fee info.

9. Capital Contributions as Shown on record: \$2,800,000.00
10. Amount of Capital Contributions in FLORIDA to date.

**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 #	P00000036456
NAME	MJP LOX CORP.
STREET ADDRESS	11 SENECA ROAD
CITY - ST - ZIP	SEA RANCH LAKES FL 33308
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	200056309992
CITY - ST - ZIP	06/18/05--01001--008 **526.25
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER _____ Date _____ Daytime Phone # _____