


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # A03000000958 1. Entity Name BREWSTER VENTURES, LTD.					
Principal Place of Business 5811 PELICAN BAY BLVD., SUITE 600 C/O FOWLER WHITE BOGGS BANKER, P.A. NAPLES, FL 34108			Mailing Address 5811 PELICAN BAY BLVD., SUITE 600 C/O FOWLER WHITE BOGGS BANKER, P.A. NAPLES, FL 34108		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
FOWLER WHITE BOGGS BANKER, P.A. 5811 PELICAN BAY BLVD., SUITE 600 NAPLES, FL 34108				Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$15,000,000.00		10. Amount of Capital Contributions in FLORIDA to date. \$15,000,000.00			
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 #	P03000072750		STREET ADDRESS		
NAME	BREWSTER VENTURES, INC.		CITY-ST-ZIP		
STREET ADDRESS	5811 PELICAN BAY BLVD., SUITE 600				
CITY-ST-ZIP	NAPLES, FL 34108				
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STREET ADDRESS					
CITY-ST-ZIP					
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 629, Florida Statutes.					
SIGNATURE: <i>Paul James</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> Paul James, Co-President			239-948-4699 2-22-05		

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