

2001 UNIFORM BUSINESS REPORT (UBR)

0014625 AF

DOCUMENT # A94000001651

1. Entity Name

DLE, LTD.

Principal Place of Business

101 BIG BEND ROAD
RUSKIN FL 33570

Mailing Address

101 BIG BEND ROAD
RUSKIN FL 33570

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3289775

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ELSBERRY, DONALD L
101 BIG BEND ROAD
RUSKIN FL 33570

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$5,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

36,392

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

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
	ELSBERRY, DONALD L	101 BIG BEND ROAD	RUSKIN FL 33570
	WILLIFORD, LYNDA KAY	ROUTE 1, BOX 448A, FAIRVIEW ROAD	ANDREWS NC 28901
	ELSBERRY, LORI DIANE	101 BIG BEND ROAD	RUSKIN FL 33570
	ELSBERRY, LAWRENCE GLENN	101 BIG BEND ROAD	RUSKIN FL 33572
	ESFORMES, CHARIS RENEE	101 BIG BEND ROAD	RUSKIN FL 33572

STREET ADDRESS	CITY-ST-ZIP

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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: *Donald L. Elsberry* DONALD L. ELSBERRY 2/28/01 (813)677-6221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

FILED
01 APR -4 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CR2E003 (11/00)