



2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A97000002296		
1. Entity Name IDP INVESTMENT GROUP, LTD., LLP		

Principal Place of Business 146 26TH AVENUE NE ST. PETERSBURG, FL 33704	Mailing Address 146 26TH AVENUE NE ST. PETERSBURG, FL 33704
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED
2004 JAN 16 AM 8:59
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
100027052404
01/16/04--01027--009 **526.25



01122004 Chg-LP CR2E003 (10/03)

6. Name and Address of Current Registered Agent	
DALTON, MONICA I 146 26TH AVENUE NE ST. PETERSBURG, FL 33704	

4. FEI Number 59-3474387	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$1,600,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$1,600,000.00
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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	
STREET ADDRESS	146 26TH AVENUE NE	CITY-ST-ZIP	
CITY-ST-ZIP	ST. PETERSBURG, FL 33704		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	DALTON, MONICA I	CITY-ST-ZIP	
CITY-ST-ZIP	146 26TH AVENUE NE		
	ST. PETERSBURG, FL 33704		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	IZZO, JOSEPH A DR.	CITY-ST-ZIP	07040
CITY-ST-ZIP	71 KENDAL AVENUE		
	MAPLEWOOD, NJ 02481		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	IZZO, JEFFREY	CITY-ST-ZIP	
CITY-ST-ZIP	8 CRESCENT STREET		
	WELLESLEY, MA 02481		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
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 620, Florida Statutes

SIGNATURE: *Monica I. Dalton* **MONICA I. DALTON** 1/13/04 727-821-9655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE