200		RTNERSHIP AN 7 May 1, 2005	NNUAL REF	PORT	FILED
DOCUMENT # A9800000321 1. Entity Name				2005 APR 18 PM 1: 16	
	DLEBROOKS INVESTM	ENT GROUP, LTD.		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place	e of Business	Mailing Address			
526 EAST 7TH AVE. TALLAHASSEE, FL 32303		526 EAST 7TH AVE. Tallahassee, FL 323	03		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		- 01142005 Chg-LP	CR2E003 (10/03)
City & State		City & State		4. FEI Number 59-3491210	Applied Fo
Zip Country		Zip	Country	5. Certificate of Status Desire	d \$8.75 Additional Fee Required
	6. Name and Address of Cur	ent Registered Agent		7. Name and Address of Nev	w Registered Agent
526 EAST	ROOKS, HARRY SR. 7TH AVENUE SSEE, FL 32303		Name Ha Street Address	(P.O. dox Number is Haracopia East	llebrooks Jr. enve
			City Tall	ahassee	FL Zin Code
the obligations of edistered agent. A. Mutter C. SIGNATURE Signature. typed or printed name of registered agent and tide II applicable. 9. Capital Contributions as Shown on record. \$594,000.00 10. Arriount of Cap in FLORIDA to				9,00	DATE
	NOTE: General Partners	R THAT IS A BUSINESS EN MAY NOT be changed on th	TITY MUST BE REGIS le form; an amendme	TERED AND ACTIVE WITH nt must be filed to change a	i general partner.
12. GENERAL PARTNER INFORMATION DDCUMENT / P98000010469			13.	ADDRESS (	
NAME STREET ADDRESS CITY-ST-ZIP	M SOUTH CORPORATION 526 EAST 7TH AVENUE TALLAHASSEE, FL 32303		STREET ADDRESS		
DOCUMENT #			STREET ADDRESS		
NAME STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		,
			STREET ADDRESS	100054	+199561 15-010 **535.00-
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		
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DOCUMENT # NAME		······	STREET ADDRESS		
STREET ADDRESS CITY+ST-ZIP			CITY-ST-ZIP		
indicated.	ertify that the information supplied on this report is true and accurate er or trustee empowered to execut Work March UBE- March So Mc	and that my signature shall have t	ha sama lariat affact as if i	nada undar oath- that Lam a Goo	es. I further certify that the informatic leral Partner of the limited partnersh
SIGNAT		Corpor-Hr- D		ther 9/15 Date	200 5 Daytume Phone #