2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED Apr 28, 2008 08:00 AN Secretary of State

\$8.75 Additional Fee Required

Due By May 1, 2006		
DOCUMENT # B0400000550 1. Entity Name DJT VENTURE NO. ONE, L.P.		
Principal Place of Business 16910 DALLAS PARKWAY STE 100 DALLAS, TX 75248	Mailing Address 16910 DALLAS PARKWAY STE 100 DALLAS, TX 75248	



DO NOT WRITE IN THIS SPACE 04172008 No Chg-LP CR2E003 (12/06) 4. FEI Number 20-1964373 Applied For Not Applicable

6. Name and Address of Current Registered Agent

CORNERSTONE MANAGEMENT & LEASING INC. 1936 SAN MARCO BLVD. JACKSONVILLE, FL 32207

SIGNATURE:

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

		IN THIS STAGE	
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, typed or printed name of registered agent and title if applicable	4/17/08 DATE	
FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00			
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		
DOCUMENT ≠	M98000000748		
NAME	ST. IVES HOLDINGS LLC		
STREET ADDRESS	16910 DALLAS PARKWAY STE 100	J00000930952	
CITY-ST-ZIP	DALLAS, TX 75248	.000000930952 05/21/08-80129-018 500.00	
DOCUMENT #			
NAMÉ			
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #			
NAME		DO NOT WOITE	
STREET ADDRESS		DO NOT WRITE	
CITY-ST-ZIP		INI THE COACE	
DOCUMENT #		IN THIS SPACE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT /			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER