

**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

FL Dept of State
\$ 526.75 *js*


FILED

05 APR 19 PM 1:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # A98000002641

1. Entity Name
VILLAGE AT TOWN CENTER LIMITED PARTNERSHIP



Principal Place of Business: 300 EAST LOMBARD ST SUITE 1200 DAVENPORT, FL 33896

Mailing Address: C/O RESIDENCE MANAGEMENT, INC. 209 TOWN CENTER BLVD DAVENPORT, FL 33896

2. Principal Place of Business: 200 VILLAGES BLVD


3. Mailing Address: C/O ALEX BROWN REALTY, INC. 300 EAST LOMBARD ST. SUITE 1200

City & State: DAVENPORT, FL

City & State: BALTIMORE, MD

Zip: 33896 Country: US

Zip: 21202 Country: US



03012005 Chg-LP CR2E003 (10/03)

4. FEI Number: 59-3519220 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE: _____

9. Capital Contributions as Shown on record: \$1,350,100.00

10. Amount of Capital Contributions in FLORIDA to date: 1,350,100.00

**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 # | F98000006485 | STREET ADDRESS | 300 EAST LOMBARD ST. SUITE 1200 |
| NAME | BROWN VTC, INC. | CITY-ST-ZIP | BALTIMORE, MD 21202 |
| STREET ADDRESS | 225 EAST REDWOOD STREET | | |
| CITY-ST-ZIP | BALTIMORE, MD 21202 | | |
| DOCUMENT # | GP9800001039 | STREET ADDRESS | |
| NAME | VILLAGE PARTNERS, A FLORIDA GENERAL PARTN. | CITY-ST-ZIP | |
| STREET ADDRESS | 209 TOWN CENTER BLVD | | |
| CITY-ST-ZIP | DAVENPORT, FL 33896 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
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| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| 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 620, Florida Statutes

SIGNATURE: *[Signature]* DATE: 04/08/05 410-727-4083

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER: *[Signature]* DATE: 04/08/05 DAYTIME PHONE #: 410-727-4083

STAPLE CHECK HERE