

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A11323

1. Entity Name

DADE CITY PARTNERS, LTD.

FILED

02 FEB 27 PM 3:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

P.O. BOX 999  
CHADDS FORD PA 19317

Mailing Address

P.O. BOX 999  
CHADDS FORD PA 19317

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

51-0261455

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORE, BRUCE E

C/O BRANDYWINE FINANCIAL SERVICE CORP.

2837 MCCORMICK DRIVE

CLEARWATER FL 33759

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.

DATE

9. Capital Contributions  
as Shown on record.

\$1,552,600.00

10. Amount of Capital Contributions  
in FLORIDA to date.

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 # 852350  
NAME BRANDYWINE CORPORATION  
STREET ADDRESS 2 POND'S EDGE DR.  
CITY-ST-ZIP CHADDS FORD PA

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME HOLTON, ROBERT V., JR.  
STREET ADDRESS 2 POND'S EDGE DR.  
CITY-ST-ZIP CHADDS FORD PA

STREET ADDRESS

CITY-ST-ZIP

500005044235--4

03/05/02 01063-024

\*\*\*\*535.00 \*\*\*\*535.00

DOCUMENT #  
NAME MOORE, BRUCE E.  
STREET ADDRESS 2 POND'S EDGE DR.  
CITY-ST-ZIP CHADDS FORD PA

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME WATSON, F. LAMAR  
STREET ADDRESS 2 POND'S EDGE DR.  
CITY-ST-ZIP CHADDS FORD PA

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME PENDLETON, EDMUND E.  
STREET ADDRESS 2 POND'S EDGE DR.  
CITY-ST-ZIP CHADDS FORD PA

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
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:

*Bruce E. Moore*  
PRESIDENT OF BRANDYWINE CORPORATION  
GENERAL PARTNER

FEB - 8 2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

0018715 AB

CR2E003 (9/01)