
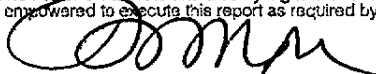


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 05, 2005 08:00 AM
Secretary of State

DOCUMENT # A11323					
1. Entity Name DADE CITY PARTNERS, LTD.					
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	4. FEI Number 51-0261455	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$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. 2631 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$1,552,600.00		10. Amount of Capital Contributions in FLORIDA to date. \$1,552,600.00			
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 #	852350		STREET ADDRESS	05/05/05-80129-009 535.00	
NAME	BRANDYWINE CORPORATION		CITY - ST - ZIP		
STREET ADDRESS	2 POND'S EDGE DR.		CITY - ST - ZIP		
CITY - ST - ZIP	CHADDS FORD, PA		CITY - ST - ZIP		
DOCUMENT #			STREET ADDRESS		
NAME			CITY - ST - ZIP		
STREET ADDRESS			CITY - ST - ZIP		
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STREET ADDRESS			CITY - ST - ZIP		
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)(c), 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		4/18/05 (610) 388-9600	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		GENERAL PARTNER		Date Day/Time Phone #	



03302005 Chg-LP CR2E003 (10/03)

4. FEI Number 51-0261455 Applied For Not Applicable

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

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