


**2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006**

**FILED
Feb 13, 2006 08:00 AM
Secretary of State**

DOCUMENT # A99000000275
1. Entity Name
VILLAGE AT PARK ROAD LIMITED PARTNERSHIP



Principal Place of Business
**2120 VILLAGE PARK ROAD
PLANT CITY, FL 33566**

Mailing Address
**C/O ALEX BROWN REALTY, INC.
300 EAST LOMBARD ST S/1200
BALTIMORE, MD 21202**



02022006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3556229 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**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$500.00
After May 1, 2006, 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 #	F99000000908
NAME	BROWN VPR, INC.
STREET ADDRESS	300 EAST LOMBARD STREET SUITE 1200
CITY-ST-ZIP	BALTIMORE, MD 21202
DOCUMENT #	GP9800001039
NAME	VILLAGE PARTNERS, A FLORIDA GENERAL PART
STREET ADDRESS	209 TOWN CENTER BLVD
CITY-ST-ZIP	DAVENPORT, FL 33896
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000433345
02/24/06-80014-004 500.00

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

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: *[Signature]* **Treasurer of G.P. BROWN VPR, Inc.** 2/2/06 410-737-4083
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #