## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

## FILED Mar 04, 2004 08:00 AM Secretary of State

2. Principal Picce of Business   2. Mailing Address   3. Mailing Address   4. FEI Number   CREECOS (10/03)	DOCUMENT # B0100000366  1. Entry Name JEFFERSON AT ALAFAYA LIMITED PARTNERSHIP  Principal Place of Business  Mailing Address					Secretary of State	
Sude, April # airc	600 EAST LAS COLINAS BLVD., SUITE 1800 P.O. BOX 619091						
City & State  City & State  City & State  City & State  Country  C	Principal Place of Business						
The Second Continuations   The Second Continuation   The Second Cont	Suite, Apt # etc		Suite, Apt. #. etc.			01122004 Chg-LP CR2E003 (10/03)	
S. Certinear of Status Desired   Fee Required   Fee						75-2961238 Not Applicable	
Name	Zφ					Fee Required	
CCPPORATION SERVICE COMPANY 1201 HAVS STREET TALLAHASSEE, FL 32301-2525  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 T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered agent, or both, in the State of Florida T am familiar with, and accept the obligations of registered office or registered agent, or both, in the State of Florida T am familiar with, and accept the familiar with, and accept the	ļ	6. Name and Address of Current	Registered Agent		Nama	7. Name and Address of New Registered Agent	
TALLAMASSEE, FL 32301-2525  City FL Zip Code  8. The above named only 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 only 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 only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered only agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registere	CORPORATION SERVICE COMPANY				ļ	P.O. Po. Murcher of New Aggregation	
S. The above named entry 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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida.  SIGNATURE:  Special contributions  A GENERAL PARTINER 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 IS.  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M970000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M970000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M97000000516  M970000000516  M97000000516  M9700					Street Address (	1 O Box Northber to Not Acceptable	
SIGNA FURT  Signate lipsed or presentance of registered agents and size it applicable  9. Capital Contributions as 97-own on record.  9. Capital Contributions as 97-own on record.  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  DICTURNATE IN THE PROPERTY OF THE						FL	
9. Capital Contributions as \$7.50,000.00 10. Amount of Capital Contributions as \$7.50,000.00 10. Amount of Capital Contributions in FLORIDA to date. 80.50,000.00 10. AGENERAL 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 filled to change a general partner.  12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY  13. ADDRESS CHANGES ONLY  14. APARTMENT COMMUNITY REALTY LLC  500 EAST LAS COLINAS BLVD., SUITE 1800  15. CITY-S1-2P  15. CITY-S1							
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A GENERAL PARTINER THAT IS A BUISINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner.  12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY  OURSINES OF ADDRESS CHANGES ONLY  MAYO000005 16  APARTMENT COMMUNITY REALTY LLC 600 EAST LAS COLINAS BLVD , SUITE 1800  CITY-ST-2P  COCUMENT /  MAKE STREET ADDRESS CITY-ST-2P	as Shows on record \$8,750,000,000 in Ft OBIO4 to date						
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Executive Vice President and Senior Operational Partner

FINANCIAL SOTUTORS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER