



2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Feb 08, 2005 08:00 AM
Secretary of State

DOCUMENT # B01000000366 1. Entity Name JEFFERSON AT ALAFAYA LIMITED PARTNERSHIP					
Principal Place of Business 600 EAST LAS COLINAS BLVD., SUITE 1800 DALLAS, TX 75035			Mailing Address P.O. BOX 619091 DALLAS, TX 75261-9091		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		 01122005 Chg-LP CR2E003 (10/03)	
City & State		City & State			
Zip Country		Zip Country			
4. FEI Number 75-2961238		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$8,750,000.00		10. Amount of Capital Contributions in FLORIDA to date.		\$ 526.25	
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 #	M97000000516		STREET ADDRESS		
NAME	APARTMENT COMMUNITY REALTY LLC		CITY - ST - ZIP		
STREET ADDRESS	600 EAST LAS COLINAS BLVD., SUITE 1800				
CITY - ST - ZIP	DALLAS, TX 75035				
DOCUMENT #			STREET ADDRESS		
NAME			CITY - ST - ZIP		
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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)(l), 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: <u>Thomas F. Kavanagh</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Thomas F. Kavanagh Asst. Vice President <u>1/28/05</u> <small>Date Daytime Phone #</small>		

STAPLE CHECK HERE