

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

**FILED**  
**Apr 26, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A93000000010</b>					
<b>1. Entity Name</b> THE WOODS APARTMENTS LIMITED					
<b>Principal Place of Business</b> % GAINESVILLE REAL ESTATE MNGT. CO. INC. 2040 N.W. 67TH PLACE GAINESVILLE, FL 32653			<b>Mailing Address</b> % GAINESVILLE REAL ESTATE MNGT. CO. INC. 2040 N.W. 67TH PLACE GAINESVILLE, FL 32653		
<b>2. Principal Place of Business</b> Suite, Apt. #, etc.			<b>3. Mailing Address</b> Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		01232004    Chg-LP    CR2E003 (10/03)	
<b>4. FEI Number</b> 59-3161288				Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> CRUTCHER, KEITH A 2040 N.W. 67TH PLACE GAINESVILLE, FL 32653			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
<b>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.</b>					
SIGNATURE _____ DATE _____ <small>Signature: typed or printed name of registered agent and title if applicable</small>					
<b>9. Capital Contributions as Shown on record.</b> \$291,149.70			<b>10. Amount of Capital Contributions in FLORIDA to date.</b> 0		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	P92000006734		STREET ADDRESS		
NAME	GAINESVILLE REAL ESTATE MANAGEMENT CO., INC		CITY-ST-ZIP		
STREET ADDRESS	2040 N.W. 67TH PLACE		STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE, FL 32606		CITY-ST-ZIP		
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CITY-ST-ZIP			CITY-ST-ZIP		
<b>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.</b>					
<b>SIGNATURE:</b>			Keith Crutcher    4/12/04    3523764939		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

STAPLE CHECK HERE

