


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Mar 12, 2004 08:00 AM
Secretary of State

DOCUMENT # A97000000482	
1. Entity Name SPRING VALLEY, LTD.	

Principal Place of Business 2909 WEST STATE ROAD 434 SUITE 121-131 LONGWOOD, FL 32779	Mailing Address 2909 WEST STATE ROAD 434 SUITE 121-131 LONGWOOD, FL 32779
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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01092004 Chg-LP CR2E003(10/03)

4. FEI Number 59-3440716	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOODMAN, BARRY S 2909 WEST STATE ROAD 434 SUITE 121-131 LONGWOOD, FL 32779

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

9. Capital Contributions as Shown on record. \$2,360,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 #	P97000008656	STREET ADDRESS	
NAME	SPV CORPORATION	CITY-ST-ZIP	
STREET ADDRESS	2909 WEST STATE ROAD 434, SUITE 121-131		
CITY-ST-ZIP	LONGWOOD, FL 32779		
DOCUMENT #		STREET ADDRESS	U00000095240
NAME		CITY-ST-ZIP	03/24/04-80018-017 526.25
STREET ADDRESS			
CITY-ST-ZIP			
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

Spring Valley, Ltd. by SPV Corporation, general partner
SIGNATURE:  Barry S. Goodman, President 3/1/04 407-786-4244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #