


2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004

DOCUMENT # B01000000064 1. Entity Name ALLIANCE GJ LIMITED PARTNERSHIP	
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 APR -1 AM 10:01

Principal Place of Business 221 NORTH LASALLE ST., STE. 3700 CHICAGO IL 60601	Mailing Address 135 REVERE DRIVE NORTHBROOK IL 60062
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MOORE CR2E003 (11/03)

2. Principal Place of Business 135 Revere Drive	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State Northbrook, IL	City & State
Zip 60062	Country USA

4. FEI Number 36-4423537	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

9. Capital Contributions as Shown on record. \$1,971,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$1,971,000.00	11. MAKE CHECK PAYABLE TO FL DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 # NAME STREET ADDRESS CITY-ST-ZIP	F01000001124 ALLIANCE GJ GP, INC. 221 N. LASALLE STREET, SUITE 3700 CHICAGO IL 60601	STREET ADDRESS	
		CITY-ST-ZIP	500032836575
			04/15/04--01018--028 **526.25
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		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)(i), 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:  Andrew W. Schor, President
 Alliance GJ GP, Inc.

3-26-04 847-562-1400
 Date Daytime Phone #