2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

Due by May 1, 2003					7 FILED
1. Entity Nar	MENT # B0400000 son value associates				2005 MAY -3 PM 2: 58 SECRETARY OF STATE
Disciso Disco of Business Mailing Address					SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business C/O CORPORATION SERVICE COMPANY 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19908		Mailing Address C/O CORPORATION SERVICE COMPANY 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19908			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		04142005 Chg-LP CR2E003 (10/93)
City & State		City & State			4. FEI Number Applied For Not Applieable
Zip	Country	Zip			5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent Name					7. Name and Address of New Registered Agent
SHEWALTER, WILLIAM A C/O THE GOODMAN COMPANY 777 S. FLAGLER DRIVE, STE. 1101 WEST PALM BEACH, FL 33401				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					
Signature, typed or printed name of registered agent and title if applicable. DATE					
9. Capital Contributions as Shown on record. \$0.00 as Shown on record. \$0.00 bin FLORIDA to date.					
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.					
DOCUMENT /	GENERAL PARTNER INFORMATION 13				ADDRESS CHANGES ONLY
NAME	M04000003000 SECOND JEFF GP LLC	· • • •		ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	77 S. FLAGLER DRIVE, STF. 1101		CITY	-ST-ZIP	44-2
DOCUMENT / NAME			STRE	ET ADDRESS	05/26/05 01022 026 14:300.00
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	
DOCUMENT / NAME			STRE	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	í f		CITY	-ST-ZIP	400055364834 05/26/0501022026 **150.00
DOCUMENT # NAME			STRE	ET ADORESS	05/26/0501022026 **150.00
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	
DOCUMENT #			STRE	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			CITY-	-ST-ZIP	
DCCUMENT # NAME STREET ADDRESS			STRE	ET ADORESS	
CITY-ST-ZIP				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)(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 eath; that I am a General Partner of the limited partnership or the receiver or trustee ampowered to execute this report as required by Chapter 620, Eprida Statutes Second Jeff CI2 Land, general partner, by: Goodman Properties Inc., its manager					

Daytime Phone #

STAPLE CHECK HERE