

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT  
TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 SEP 29 PM 12:01



1. Name of Limited Partnership

1a. DOCUMENT #  
**A95000000917**

THE SUMMIT AT TOPS'L, LTD.

Mailing Address

Principal Office Address

~~6075 POPLAR AVENUE, SUITE 400~~  
~~MEMPHIS TN 38119~~

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~~MEMPHIS TN 38119~~

3. Date Formed or Registered

06/19/1995

5a. Capital Contributions as  
Shown on record.

\$2,700,000.00

3a. Date of Last Report

01/03/1997

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

4. State or Country of Formation

FL

2. Mailing Address

1000 Ridgeway Loop Rd.

2a. Principal Office Address

Same

Suite, Apt. #, etc.

Suite 320

Suite, Apt. #, etc.

City & State

Memphis, TN

City & State

Zip

38120

Country

Shelby

Zip

Country

6. FEI Number

59-3293708

☐ Applied For  
☒ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

THE SUMMIT AT TOPS'L, INC.

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

~~6075 POPLAR AVENUE, S~~  
1000 Ridgeway Loop Rd.  
Suite 320

11b. City, State & Zip Code

MEMPHIS TN 38119  
Memphis, TN 38120

11c. Registration/  
Document Number

P94000089186

2000023091420-2  
-10/01/97-01933-009  
\*\*\*\*541.25 \*\*\*\*541.25

**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

THE SUMMIT AT TOPS'L, INC.

BY: *Frank L. Flautt, Jr.*

DATE

9/18/1997

Typed or Printed Name of General Partner Signing Form

Frank L. Flautt, Jr.

Daytime Telephone Number

901/681-9181

CRZE003 (6/97)