


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 MAR 18 PM 3:20

DOCUMENT # A95000000978 1. Entity Name LANSCOT DEVELOPMENT AT TOPS'L, LTD.					
Principal Place of Business 850 RIDGE LAKE BLVD., SUITE 330 MEMPHIS, TN 38120			Mailing Address 850 RIDGE LAKE BLVD., SUITE 330 MEMPHIS, TN 38120		
2. Principal Place of Business 850 RIDGE LAKE BLVD.		3. Mailing Address 850 RIDGE LAKE BLVD			
Suite, Apt. #, etc. SUITE 220		Suite, Apt. #, etc. SUITE 220			
City & State MEMPHIS, TN		City & State MEMPHIS, TN			
Zip 38120		Country USA		Zip 38120	
Country USA		4. FEI Number 62-1608595			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
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		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$700,000.00		10. Amount of Capital Contributions in 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.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	P95000050586		STREET ADDRESS	850 RIDGE LAKE BLVD., SUITE 220	
NAME	LANSCOT, INC.		CITY-ST-ZIP	MEMPHIS, TN 38120	
STREET ADDRESS	850 RIDGE LAKE BLVD., SUITE 330				
CITY-ST-ZIP	MEMPHIS, TN 38120				
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STREET ADDRESS					
CITY-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 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: <i>Thomas J. Jorjich, Pres.</i>			Date: 3/15/04 Daytime Phone #: 901-842-5303		



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