


**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

FILED

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SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

<b>DOCUMENT # A9600002401</b>	
1. Entity Name <b>THE LANDINGS AT CYPRESS MEADOWS LIMITED PARTNERSHIP</b>	

Principal Place of Business <b>6000 COMPTON ESTATES WAY TAMPA, FL 33647</b>	Mailing Address <b>6000 COMPTON ESTATES WAY TAMPA, FL 33647</b>
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



01072004 Chg-LP CR2E003 (10/03)

4. FEI Number <b>59-3420170</b>		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent		
<b>INGLIS, JOHN S                  C/O SHUMAKER, LOOP &amp; KENDRICK, LLP                  101 EAST KENNEDY BLVD., SUITE 2800                  TAMPA, FL 33602</b>		

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	<b>FL</b> 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 title if applicable.

9. Capital Contributions as Shown on record. <b>\$1,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>\$1,000.00</b>
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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	
DOCUMENT #	<b>P96000102727</b>
NAME	<b>THE LANDINGS AT CYPRESS MEADOWS CORP.</b>
STREET ADDRESS	<b>6000 COMPTON ESTATES WAY</b>
CITY-ST-ZIP	<b>TAMPA, FL 33647</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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**01/26/04--01095--014 \*\*141.25**

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.

**The Landings at Cypress Meadows Corporation, General Partner**

**SIGNATURE:**  **Warren Kinsler, Director** **1/23/04** **813/910-7914**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE