


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F97000001037	
1. Entity Name LSOF GENPAR, INC.	

FILED

04 MAY -3 AM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 717 N HARWOOD STREET STE 2200 DALLAS, TX 75201	Mailing Address 717 N HARWOOD STREET STE 2200 DALLAS, TX 75201
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Handwritten signature/initials



04272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-2679796	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

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 _____	(NOTE: Registered Agent signature required when reinstating)	DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GRAYKEN, JOHN P 50 WELBECK STREET LONDON, ENGLAND W1G 9XW,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DELL, J D 717 N. Harwood Street, Ste. 2200 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VELVIN, BENJAMIN D III 717 N. Harwood Street, Ste. 2200 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FORD, MARY E 717 N. Harwood Street, Ste. 2200 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PALETTA LOUIS 717 N. Harwood Street, Ste. 2200 DALLAS, TX 75201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SHEARER, STEVEN R 717 N HARWOOD STREET STE 2200 DALLAS, TX 75201

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05/11/04--01021--016 **150.00

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Mary Etta Ford</i>	Mary Etta Ford, Secretary 4/29/04	214-754-8400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		