


**2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008**

DOCUMENT # A0600000368 1. Entity Name MORSE-SEMBLER VILLAGES #5, LTD.	
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Principal Place of Business 5858 CENTRAL AVE. ST. PETERSBURG, FL 33707	Mailing Address 5858 CENTRAL AVE. ST. PETERSBURG, FL 33707
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent SHER, CRAIG H 5858 CENTRAL AVE. ST. PETERSBURG, FL 33707		7. Name and Address of New Registered Agent Name <u>SEMBLER GREGORY S.</u> Street Address (P.O. Box Number is Not Acceptable) <u>5858 CENTRAL AVENUE</u> City <u>ST. PETERSBURG FL</u> Zip Code <u>33707</u>	
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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: Gregory S Sembler PRESIDENT DATE: 4-23-08

**FILE NOW!!! FEE IS \$500.00
After May 1, 2008, Fee will be \$900.00**

**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 #	P06000032036	STREET ADDRESS	
NAME	MORSE-SEMBLER VILLAGES #5, INC.	CITY - ST - ZIP	
STREET ADDRESS	5858 CENTRAL AVE.		
CITY - ST - ZIP	ST. PETERSBURG, FL 33707		
DOCUMENT #		STREET ADDRESS	300127458393
NAME		CITY - ST - ZIP	04/30/08--01055--007 **508.75
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DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Gregory S Sembler PRESIDENT DATE: 4-23-08 DAYTIME PHONE #: 727-384-6000

GREGORY S. SEMBLER

FILED
08 APR 30 AM 8: 38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02282008 Chg-LP CR2E003 (12/06)

4. FEI Number
20-4520463 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

STAPLE CHECK HERE