


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

**FILED
Apr 26, 2004 08:00 AM
Secretary of State**

DOCUMENT # A07315					
1. Entity Name PUBLIC STORAGE PROPERTIES V, LTD.					
Principal Place of Business 701 WESTERN AVENUE, 2ND FLOOR GLENDALE, CA 91201			Mailing Address 701 WESTERN AVENUE, 2ND FLOOR GLENDALE, CA 91201		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 95-3292068	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE, FL 32301-2525			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 date if applicable</small>					
9. Capital Contributions as Shown on record. \$22,000,000.00		10. Amount of Capital Contributions in FLORIDA to date.		6526.25	
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 #	F96000002630		STREET ADDRESS		
NAME	BWH MARINA CORPORATION II		CITY - ST - ZIP		
STREET ADDRESS	701 W AVE #200				
CITY - ST - ZIP	GLENDALE, CA 912012349				
DOCUMENT #	850308		STREET ADDRESS	U00000145371	
NAME	PUBLIC STORAGE INC		CITY - ST - ZIP	05/03/04-80020-021 526.25	
STREET ADDRESS	701 W AVE #200				
CITY - ST - ZIP	GLENDALE, CA 912012349				
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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>Drew Adams</i>			Corporate Gen. Partner Vice President		818-244-8080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date		Daytime Phone #
			4/23/2004		



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