2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9900000255 1. Entity Name							
ROOT REAL ESTATE V, LTD.					FILED		
Principal Place of Business Mailing Address 525 FENTRESS BOULEVARD POST OFFICE B DAYTONA BEACH FL 32114 DAYTONA BEAC					OO MAR 16 PM 2: 11 SECRETARY OF STATE TALLAHASSEE, FLORIDA		
2. Principal Place of Business 275 Clyde Morris Blvd. 3. Mailing Address 275 Clyde Morris Blvd. 275 Clyde Morr			s Rlvd			AIN BERNY EBARN BERNY EBARN BERNO NYBER BANGY BANY 1881	
Suite, Apt.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State	Beach, FL	City & State Ormond Beach, FL		4 . FE	El Number	Applied For Not Applicable	
		32174	USA	l	5. Certificate of Status Desired S8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent Name					7. Name and Address of New Registered Agent		
	VILLIAM J RESS BOULEVARD BEACH FL 32114	Street Ac	William J. Voges Street Address (P.O. Box Number is Not Acceptable) 275 Clyde Morris Blvd.				
			City	Ormond Beach FL Zip.Cpde 32174			
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.							
SIGNATURE William J. Voges, Registered Agent 1/10/2000 (NOTE: Registered Agent signature required when reinstating) OATE							
9. Capital Co as Shown o	on record.		382,000.00 SEE REVERSE SIDE FOR FEE INFORMATION				
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 #	F92000000919 ROOT REAL ESTATE CORP. 525 FENTRESS BOULEVARD	STREET ADDRESS	275 C	75 Clyde Morris Blvd.			
STREET ADDRESS	DAYTONA BEACH FL 32114		CITY-ST-ZIP	0rmono	d Beach, FL	32174	
DOCUMENT # NAME	M9400000022 RDT, L.L.C., L.C.		STREET ADDRESS	275 C	75 Clyde Morris Blvd.		
STREET ADDRESS CITY - ST - ZIP	525 FENTRESS BOULEVARD DAYTONA BEACH FL 32114		CITY-ST-ZIP	<u>Ormono</u>	Ormond Beach, FL 32174		
DOCUMENT# NAME		· •	STREET ADDRESS				
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DOCUMENT #			STREET ADDRESS				
STREET ADDRESS CITY - ST - ZIP		1	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: SIGNATURE DECRUIRED 2/2/2007 (904) 671-4887							
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER Date Dayume Phone #							