

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 MAY -1 AM 11:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A00000001928

1. Entry Name

Penn-Florida Venture V, LTD.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business

1515 N Federal Hwy

3. Mailing Address

1515 N Federal Hwy

Suite, Apt. #, etc.

Suite 306

Suite, Apt. #, etc.

Suite 306

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33432

Country

USA

Zip

33432

Country

USA

DUE BY MAY 1

4. FEI Number

65-1059405

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Kamradt, Russell T. Esq.

Street Address (P.O. Box Number is Not Acceptable)

777 South Flagler Drive

Suite 1900

City

West Palm Beach

FL

Zip Code

33401

**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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE

9. Capital Contributions

as Shown on record.

\$804,000.00

10. Amount of Capital Contributions

in FLORIDA to date.

**11. MAKE CHECK PAYABLE TO DEPT. OF STATE
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

DOCUMENT # P00000093845
NAME Penn-Florida Venture V, Inc.
STREET ADDRESS 1515 N Federal Hwy, Suite 306
CITY-ST-ZIP Boca Raton, FL 33432

STREET ADDRESS

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CITY-ST-ZIP

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IN THIS SPACE**

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:

Mark A. Gensheimer

(561) 750-1030

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

County Phone