

FILED
May 06, 2005 08:00 AM
Secretary of State

DOCUMENT # A01000000071 1. Entity Name FINLAY INTERESTS 5, LTD.		 May 06, 2005 08:00 A Secretary of State	
Principal Place of Business 4300 MARSH LANDING BLVD. SUITE 101 JACKSONVILLE BEACH, FL 32250		Mailing Address 4300 MARSH LANDING BLVD. SUITE 101 JACKSONVILLE BEACH, FL 32250	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State Zip Country		City & State Zip Country	
6. Name and Address of Current Registered Agent FINLAY HOLDINGS, INC. 4300 MARSH LANDING BLVD. SUITE 101 JACKSONVILLE BEACH, FL 32250		7. Name and Address of New Registered Agent 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 title if applicable</small>			
9. Capital Contributions as Shown on record. \$6,894,020.00		10. Amount of Capital Contributions in FLORIDA to date.	
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 #	NAME	STREET ADDRESS	
NAME	FINLAY INTERESTS GP 5, LLC	CITY-ST- ZIP	
STREET ADDRESS	4300 MARSH LANDING BLVD.		
CITY-ST- ZIP	JACKSONVILLE BEACH, FL 32250		
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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)(f), 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		Date: 4/26/05 <small>Typed Date</small>	