


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # A01000001254 1. Entity Name CORPORATE PARK V, LTD.	
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Principal Place of Business C/O STILES CORPORATION 300 S.E. SECOND STREET FORT LAUDERDALE, FL 33301	Mailing Address C/O STILES CORPORATION 300 S.E. SECOND STREET FORT LAUDERDALE, FL 33301
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01082007 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1989891	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 JONES, PATRICIA C/O STILES CORPORATION 300 S.E. SECOND STREET FORT LAUDERDALE, FL 33301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ U00000719648
05/01/07-00073 000 500.00-
DATE

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

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P01000087351 CORPORATE PARK V, INC. 300 S.E. SECOND STREET FORT LAUDERDALE, FL 33301
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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: Terry W. Stiles Terry W. Stiles 4/10/07 954-627-9300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE