


**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

<b>DOCUMENT # A06000001232</b> 1. Entity Name <b>BUTTERS REAL ESTATE FUND V, LLLP</b>	
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**FILED**

2007 JUN -6 P 2:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business <b>6820 LYONS TECHNOLOGY CIRCLE, SUITE 100</b> <b>COCONUT CREEK, FL 33073</b>	Mailing Address <b>6820 LYONS TECHNOLOGY CIRCLE, SUITE 100</b> <b>COCONUT CREEK, FL 33073</b>
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04102007 Chg-LP CR2E003 (12/06)

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

<b>6. Name and Address of Current Registered Agent</b>  <b>HOUK, JANE A</b> <b>2200 MUSEUM TOWER, 150 WEST FLAGLER STREET</b> <b>MIAMI, FL 33130</b>	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>
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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 \_\_\_\_\_  
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	13. ADDRESS CHANGES ONLY
DOCUMENT # <b>L06000100213</b> NAME <b>BUTTERS CAPITAL V, LLC</b> STREET ADDRESS <b>6820 LYONS TECHNOLOGY CIRCLE, SUITE 100</b> CITY-ST-ZIP <b>COCONUT CREEK, FL 33073</b>	STREET ADDRESS CITY-ST-ZIP <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>200104142072</b>  <b>06/08/07--01052--001 **500.00</b> </div>
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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:** \_\_\_\_\_ **M. Butters** 4/30/07 904 570-8111  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE