FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **A15591**

FILED SECRETARY OF STATE OIVISION OF CORPORATION

97 SEP 22 PH 12: 48



SHELTER PROPERTIES V LIMITED PARTNERSHIP			3 (66) 611 1961 11681 91181 61118 FOLGE (181 84614 81611 81611 61614 81641 81611 1881		
Mailing Address P.O. BOX 1089 GREENVILLE SC 29802	1089 ONE INSIGNIA FINANCIAL PLAZA		3. Date Formed or Regist 10/27/1983 3a. Date of Last Report 12/31/1996	\$52,538,000.00 5b. Amount of Capital Contributions in FLORIDA techniques.	
2. Mailing Address	28. Principal Office Address		4. State or Country of Form	1 52,538,000	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ Applied For	
City & State	City & State	City & State		Not Applicable	
Zip Country	Zip	Zip Country		7. Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee Information)	
Q Name and Address of	Current Registered Agent		10. If changed, new l	Registered Agent/Office	
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		Name			
		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.			
		City FL Zip Code			
SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TI		LIMITED ND ACTIV	PARTNERSHIP OR C	DATE DATE DISINESS ENTITY	
11, Name(s) of General Partner(s)	11a. Address of Each Gen		11b. City, State & Zip Code	11c. Registration/ Document Number	
SHELTER REALTY V CORP		ONE INSIGNIA FINANCIA		P05921	
TUCK, N. BARTON, JR.	ONE SHELTER PLACE		GREENVILLE SC 2000 -0 *	023047424 9/26/9701069007 ***541.25 ****541.25	
				KWM	
Note: General partners MAY	}				
	be with Section 119.07(3)(k) in the event that the it my signature shall have the same legal effects	information supp as if made under	olied is deemed exempt from public acce oath, I further certify that I am a General	y, Florida Statutes. I release the Division of iss. I further certify that the information indicated on Partner of the limited partnership, receiver or truste	
Typed or Printed Name of General Partner Signing Fo	my felley 11. Surch /	r, Klsz	Daytime Telephone Num	ber 864:239-1000	