

# 2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A27650

1. Entity Name

A R A PROPERTIES NO. 5, LTD.

FILED 4/4/20  
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
C/O PETER LAWRENCE COMMERCIAL REAL ESTATE C/O PETER LAWRENCE COMMERCIAL REAL ESTATE  
4710 EISENHOWER BLVD., SUITE C-1 4710 EISENHOWER BLVD., SUITE C-1  
TAMPA FL 33634-6334 TAMPA FL 33634-6334

2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
Zip Country Zip Country

4. FEI Number 52-1604126 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PETER LAWRENCE COMMERCIAL REAL ESTATE, INC  
4710 EISENHOWER BLVD  
SUITE C-1  
TAMPA FL 33634-6334

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record. \$827,500.00 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			13. ADDRESS CHANGES ONLY	
DOCUMENT #	K53295		STREET ADDRESS	
NAME	CRENSHAW PROPERTIES, INC		CITY - ST - ZIP	
STREET ADDRESS	4710 EISENHOWER BLVD., SUITE C-1			
CITY - ST - ZIP	TAMPA FL 33634-6334			
DOCUMENT #			STREET ADDRESS	
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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

Crenshaw Properties, Inc., GP  
SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-5-00 813-889-8855  
Date Daytime Phone #