

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # A27650

1. Entity Name
A R A PROPERTIES NO. 5, LTD.



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

02172004 Chg-LP CR2E003 (10/03)

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

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

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

9. Capital Contributions as Shown on record. **\$827,500.00** 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

DOCUMENT # **K53295**
 NAME **CRENSHAW PROPERTIES, INC**
 STREET ADDRESS **4710 EISENHOWER BLVD., SUITE C-1**
 CITY - ST - ZIP **TAMPA, FL 336346334**

13. ADDRESS CHANGES ONLY

STREET ADDRESS
 CITY - ST - ZIP
U00000131446
04/27/04-80006-004 526.25

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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:

Kristopher m. How **3/10/04**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

613-889-8855

Daytime Phone #

STAPLE CHECK HERE