2001 UNIFORM BUSINESS REPORT (URR)

					,,,,		" 1	ALLKOA	_ _ _		
DOCUMENT # A33574 1. Entity Name							AND				
SHELTE					APR 30 PM		٠				
Principal Place of Business SOUTH COLORADO BLVD., TWR. 2, #2-1000 DENVER CO 80222			Mailing Address POST OFFICE BOX 1089 GREENVILLE SC 29602			······································	SECRETARY OF STATE TABLAHASSEE. FLORIDA				
Principal Place of Business 3. Mailing Address											
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Stat	e		City & State				67-008/150			Applied For Not Applicable	
Zip Country			Zip	Country		-	5. Certificate of	Status Desired		8.75 Additional see Required	
	6. Name and	Address of Current	Registered Agent				7. Name and Address of New Registered Agent				
			_		Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET					Street Address (P.O. Box Number is Not Acceptable)						
TALLAHAS	SEE FL 32301-2	2525									
				}	City				FL	Zip Code	
8. The above	named entity subr	mits this statement fo	or the purpose of changing its	egistere	d office o	or registere	ed agent, or both,	in the State of Flor	da.		
SIGNATURE .	Signature, typed or prints	ed name of registered agent	and title if applicable. (NOT!	Registered	l Agent signa	beniuper enuts	when reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE		
9. Capital Contributions as Shown on record. \$20.00 in FLORIDA to dist								SEE REVERS	SIDE FOR	O DEPT. OF STATE FEE INFORMATION	
12.	A GENE NOTE: Ger	RAL PARTNER T Beral Partners MA GENERAL PARTNER	THAT IS A BUSINESS EN	e form;	JST BE	REGIST	ERED AND AC must be filed	TIVE WITH THIS to change a ger ADDRESS CHA	eral partn	er.	
	Doctood	GENERAL PARTNER	RINFORMATION	13.				ADDRESS CHAI	NGES ONLY		
DOCUMENT # NAME STREET ADDRESS	P05921 SHELTER REALTY V CORPORATION OF SOUTH CARO SOUTH COLORADO BLVD., TWR. 2, #2-1000					2000 S. Colo Blvd., Tower Two #2-1000					
CITY-ST-ZIP	DENVER CO 80			CITY-	ST-ZIP	Denve	er, CO 80	222			
DOCUMENT # NAME	ls.			STREE	ET ADDRESS						
STREET ADDRESS CITY-ST-ZIP				CITY-	ST-ZIP	ļ	10	00042	177	518 99-011	
DOCUMENT / NAME STREET ADDRESS				STREE	ET ADDRESS			-U5/15/1 <u>****14</u>)1011 1 <u>.25</u> ₹	193U11 <u>***141.25</u>	
CITY-ST-ZIP DOCUMENT #				CITY-	ST-ZIP	-				 	
NAME STREET ADDRESS					ET ADDRESS	-					
CITY-ST-ZIP				CITY-	ST-ZIP						
NAME				STREE	T ADDRESS	ļ					
STREET ADDRESS CITY-ST-ZI				CITY-	ST-ZIP	<u> </u>					
DOCUMENT #: NAME				STREE	T ADDRESS						
STREET ADDRESS CITY-ST-ZIP					ST-ZIP						
 I hereby c indicated the receive 	ertify that the inform on this report is tru er or trustee empo	mation supplied with e and accurate and wered to execute this	this filing does not qualify for that my signature shall have the sireport as required by Chapte	the exen ne same er 620, Fl	nption sta legal effe lorida Sta	ated in Sec ect as if ma atutes	ction 119.07(3)(i), ade under oath; th	Florida Statutes. I f lat I am a General I	urther certify Partner of the	that the information limited partnership or	

Shelter V GP Limited Partnership by its General Partner Shelter Realty V Corporation of South Carolina

Deborah Chesi Asst. Secy 4-26-01 (303) 757-8101

SIGNATURE: Daying Printed NAME OF SIGNING GENE IAL PARTNER

Date

Daying Prons #

SIGNATURE: