


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 MAY -3 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A95000001328. 1. Entity Name FPIP V, LTD.	
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Principal Place of Business 3696 NORTH FEDERAL HWY. SUITE 200 FT. LAUDERDALE, FL 33308	Mailing Address 3696 NORTH FEDERAL HWY. SUITE 200 FT. LAUDERDALE, FL 33308
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2. Principal Place of Business 401 EAST LAS OLAS BLVD. SUITE 1000 FT. LAUDERDALE, FL 33301	3. Mailing Address 401 EAST LAS OLAS BLVD. SUITE 1000 FT. LAUDERDALE, FL 33301
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04152005 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0607069	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MORGAN, GEORGE A JR. 3696 NORTH FEDERAL HWY. SUITE 200 FT. LAUDERDALE, FL 33308	7. Name and Address of New Registered Agent Name Street Address City
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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.

9. Capital Contributions as Shown on record. \$500.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 # NAME STREET ADDRESS CITY-ST-ZIP	L01645 FLORIDA PROPERTY INVESTMENT PARTNERS, INC. 3696 NORTH FEDERAL HWY., STE. 200 FT. LAUDERDALE, FL 33308	STREET ADDRESS CITY-ST-ZIP	401 EAST LAS OLAS BLVD. SUITE 1000 FT. LAUDERDALE, FL 33301
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
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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

SIGNATURE:   4/27/05 954-522-6010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE