2003 LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR**

FILED A95000001328 **DOCUMENT #** 03 APR 29 PM 12: 41 1. Entity Name FPIP V. LTD. SECRETARY OF STATE TALLAHASSEE FLORIDA Principal Place of Business 3696 NORTH FEDERAL HWY. Mailing Address 3696 NORTH FEDERAL HWY. SUITE 200 SUITE 200 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2003** Applied For City & State City & State 4. FEI Number 65-0607069 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required --- 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent-MORGAN, GEORGE A JR. Street Address (P.O. Box Number is Not Acceptable) 3696 NORTH FEDERAL HWY. SUITE 200 FT. LAUDERDALE FL 33308 City 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 Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Contributions \$500.00 as Shown on record in FLORIDA to date 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 ADDRESS CHANGES ONLY CR2E003 (10/02) DOCUMENT # STREET ADDRESS FLORIDA PROPERTY INVESTMENT PARTNERS, INC. NAME 3696 NORTH FEDERAL HWY., STE. 200 STREET ADDRESS CITY-ST-7IP FT. LAUDERDALE FL 33308 CITY-ST-ZIP DOCUMENT # 000017322390 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS

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

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP DOCUMENT #

CITY-ST-ZIP

NAME STREET ADDRESS

RINTED NAME OF SIGNING GENERAL PARTNER

REQUIRECGeorge A. Morgan, Jr. 04/17/03

954-563-8600 Daytime Phone #