

2001 UNIFORM BUSINESS REPORT (UBR)

0016499 AF

DOCUMENT # **A96000001810**

1. Entity Name

BARON STRATEGIC INVESTMENT FUND V, LTD.

FILED

01 APR 27 PM 3: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O GREGORY K. MCGRATH 7826 COOPER ROAD CINCINNATI OH 45242	Mailing Address C/O GREGORY K. MCGRATH 7826 COOPER ROAD CINCINNATI OH 45242
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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 58-2275820	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MCGRATH, GREGORY 4561 GULF OF MEXICO DR. #101 LONGBOAT KEY FL 34228		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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.

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. \$99.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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	P96000080579 BARON CAPITAL XL, INC. 7826 COOPER ROAD CINCINNATI OH 45242	STREET ADDRESS CITY-ST-ZIP	000004221680--4 -05/17/01--01021--014 ****150.00 ****150.00
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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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Gregory K. McGrath SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Gregory K. McGrath
April 25, 2001
(513) 984-5001

CR2E003 (11/00)