DOCUMENT # A9600000	1972	
BEEMER & ASSOCIATES V, LTD.	FILED	
Principal Place of Business Mailing	g Address	00 MAY -4 PM 4: 20
	BEACH BLVD., STE. 210 Sonville FL 32224-1200	SEGRETARY OF STATE TALL'AHASSEE, FLORIDA
2. Principal Place of Business 3. Mail	ing Address	
Suite, Apt. #, etc. Suite	e, Apt. #, etc.	DO NOT WRITE IN THIS SPACE
City & State City	& State	4. FEI Number 59-3408285 Applied For Not Applicable
Zip Country Zip	Country	5. Certificate of Status Desired Fee Required
6. Name and Address of Current Registere		7. Name and Address of New Registered Agent Name
ASHOURIAN, MIKE 13947 BEACH BLVD., STE. 210	Si	Street Address (P.O. Box Number is Not Acceptable)
JACKSONVILLE FL 32224		
	Ci	City FL Zip Code
The above named entity submits this statement for the purposition of the purposition of the statement for the state	icable. (NOTE: Registered Ager	gent signature required when reinstating) DATE
as Shown on record.	 Amount of Capital Contribution in FLORIDA to date. 	SEE REVERSE SIDE FOR FEE INFORMATION
A GENERAL PARTNEH THAT IS A NOTE: General Partners MAY NOT b	a BUSINESS ENTITY MUST e changed on the form; an	T BE REGISTERED AND ACTIVE WITH THIS OFFICE. In amendment must be filed to change a general partner.
12. GENERAL PARTNER INFORM.	ATION 13.	ADDRESS CHANGES ONLY
OCUMENT # 517147 ASH PROPERTIES, INC. TITREET ADDRESS 13947 BEACH BLVD., STE. 210		ADDRESS
JACKSONVILLE FL 32224	CITY-ST-Z	4000032869741 -06/13/00-01049-002
DOCUMENT ASHOURIAN, MIKE	STREET AD	
STREET ADDRESS 13947 BEACH BLVD., STE. 210 JACKSONVILLE FL 32224	CITY-ST-Z	-ZIP
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CITY-ST-ZIP	CITY-ST-Z	-ZIP
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CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME	STREET ADI CITY - ST - Z STREET AD CITY - ST - Z	DODRESS -ZIP DODRESS -ZIP
CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET AD	DORESS -ZIP DORESS -DORESS -DORESS

4. I hereby certify that the information surplied with this timing does not qualify to 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 the receiver or trustee empowered to see the same legal effect as if made under oath; that I am a General Partner of the limited partnership the receiver or trustee empowered to see the same legal effect as if made under oath; that I am a General Partner of the limited partnership the receiver or trustee empowered to see the same legal effect as if made under oath; that I am a General Partner of the limited partnership the receiver or trustee empowered to see the same legal effect as if made under oath; that I am a General Partner of the limited partnership the receiver or trustee empowered to see the same legal effect as if made under oath; that I am a General Partner of the limited partnership the receiver or trustee empowered to see the same legal effect as if made under oath; that I am a General Partner of the limited partnership the receiver of the limited partnership the limited par

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Mike Ashourian

4-24-00