2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022656

Entity Name: LYNCH PROPERTIES V, LLC

FILED Aug 08, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1673 WINDY BLUFF POINT LONGWOOD, FL 32750 **Current Mailing Address: New Mailing Address:** 1673 WINDY BLUFF POINT LONGWOOD, FL 32750 FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LYNCH, JUDY LYNCH, JUDY L MRS 1673 WINDY BLUFF POINT 1673 WINDY BLUFF POINT LONGWOOD, FL 32750 LONGWOOD, FL 32750 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: JUDY L. LYNCH 08/08/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: MGRM () Change (X) Addition LYNCH, QUINT L MR. Name: Name: Address: Address: 1673 WINDY BLUFF POINT City-St-Zip: City-St-Zip: LONGWOOD, FL 32750 US Title: Title: MGRM () Change (X) Addition () Delete LYNCH, JUDY L MRS. Name: Name: Address: Address: 1673 WINDY BLUFF POINT City-St-Zip: City-St-Zip: LONGWOOD, FL 32750 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: QUINT L. LYNCH MGRM 08/08/2006