

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V30268** (9)

1. Corporation Name

FLORIDA INCOME FUND V - ORLANDO, INC.



Principal Place of Business

**3250 MARY STREET
SUITE 306
MIAMI FL 33133**

Mailing Address

**3250 MARY STREET
SUITE 306
MIAMI FL 33133**

2. Principal Place of Business

2a. Mailing Address

2f. Suite, Apt. #, etc.

3. Date Incorporated or Qualified
04/21/1992

3a. Date of Last Report
08/10/1995

4. FEI Number
65-0325113

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

23. City & State

24. Zip

25. Country

26. Zip

27. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STEINFURTH, PAUL C
3250 MARY STREET
SUITE 306
MIAMI FL 33133**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Date of Signature

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PD STEINFURTH, PAUL C**
STREET ADDRESS **3250 MARY ST SUITE 306**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

2. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

3. TITLE ☐ Change ☐ Addition

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

4. TITLE ☐ Change ☐ Addition

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

5. TITLE ☐ Change ☐ Addition

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

6. TITLE ☐ Change ☐ Addition

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

**800001876798
-06/26/96--01116--008
***900.00**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul C. Steinfurth 5/6/96 805-447-1307

CR2E034 (12/95)