

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



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

FILED

96 DEC 23 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7830

1. Name of Limited Partnership
1a. DOCUMENT #
A06572

Public Storage Properties IV, Ltd.

2. Mailing Address
Dept PT
PO Box 25025
Glendale, CA 91201-5025

2a. Principal Office Address
701 Western Avenue, Ste 200
Glendale, CA 91201-2349

Suite, Apt #, etc.
PO Box 25025

City & State
Glendale, CA

Zip Country
91201-5025 Los Angeles

Suite, Apt #, etc.
Suite 200

City & State
Glendale, CA

Zip Country
91201-2349 Los Angeles

3. Date Formed or Registered
5-26-78

3a. Date of Last Report
1-5-96

4. State or Country of Formation
CA

5a. Capital Contributions as Shown on report
20,000,000

5b. Amount of Capital Contributions in FLORIDA to date:

6. FEI Number
95-3192402 Applied For Not Applicable

7. Certificate of Status Desired \$8.75 Additional Fee Required

8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent
C T Corporation System
1200 S. Pine Island Road
Plantation, FL 33324

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number Is Not Acceptable)
100002045451--7
Suite, Apt #, etc.
-01703797--01137--017
City
***576.25 ***576.25
FL Zip Code

10a. Pursuant to the provisions of sections 620.1053 and 620.192, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent [Name known with] and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
Public Storage, Inc.	701 Western Ave., Ste 200	Glendale, CA 91201	850308
Hughes, B. Wayne	701 Western Ave., Ste 200	Glendale, CA 91201	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *[Signature]* DATE 12-2-94

Typed or Printed Name of General Partner Signing Form **Obren B. Gerich,** Daytime Telephone Number **(818)244-8080**

CR2E003 (6/96)

TF *[Signature]*