## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

## **FILED** Apr 25, 2006 08:00 AN Secretary of State DOCUMENT # A09574 PUBLIC STORAGE CRESCENT FUND, LTD. Principal Place of Business Mailing Address 701 WESTERN AVENUE, 2ND FLOOR 701 WESTERN AVENUE, 2ND FLOOR GLENDALE, CA 91201 GLENDALE, CA 91201 04122006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 95-3549309 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. DO NOT WRITE 2731 EXECUTIVE PARK DRIVE SUITE 4 IN THIS SPACE WESTON, FL 33331 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00 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 850308 **DOCUMENT #** U00000533047 ω5/06/06-80105-025 500.00 NAME PUBLIC STORAGE, INC. STREET ADDRESS 701 WESTERN AVENUE CiTY-ST-7IP GLENDALE, CA 912012349 F96000002628 DOCUMENT # NAME HFAC TWO, INC. STREET ADDRESS 701 WESTERN AVENUE City-st-7iP GLENDALE, CA 912012349 F93000002841 DOCUMENT # NAME AMAR STORAGE COMPANY INC DO NOT WRITE STREET ADDRESS 701 WESTERN AVENUE CiTY-ST-ZIP GLENDALE, CA 912012349 IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

GNATURE AND TYPEDOR PRINTED NAME OF SIGNING GENERAL PARTIES

Corporate Gen. Partner
Vice President

4/0/0

8187418080

Daytime Phone #