


**2005 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2005**

**FILED**  
**Apr 09, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # A13886**  
1. Entity Name  
**PUBLIC STORAGE EURO PARTNERSHIP VI, LTD.**



Principal Place of Business  
**701 WESTERN AVENUE, 2ND FLOOR  
GLENDALE, CA 91201**

Mailing Address  
**701 WESTERN AVENUE, 2ND FLOOR  
GLENDALE, CA 91201**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip Country



03082005 Chg-LP CR2E003 (10/03)

4. FEI Number  
**95-3806392**

Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

5. Name and Address of Current Registered Agent  
**NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$12,500,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$526.25**

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	850308 PUBLIC STORAGE INC. 701 WESTERN AVENUE GLENDALE, CA 91201	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	HUGHES, B. WAYNE 701 WESTERN AVENUE GLENDALE, CA 91201	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F96000002628 HFAC TWO, INC. 701 WESTERN AVENUE GLENDALE, CA 91201	STREET ADDRESS CITY-ST-ZIP	
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100000294949  
04.09.05 00009-009 526.25

STAPLE CHECK HERE

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

**SIGNATURE:**  **Drew Adams Vice President** **3/25/2005** **818-244-8080**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #