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Jan 21 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # J39406 (0)

1. Corporation Name  
STORAGE TRAILERS UNLIMITED, INC.



Principal Place of Business: 6584 50TH AVENUE N. ST. PETERSBURG FL 33709  
Mailing Address: 6584 50TH AVENUE N. ST. PETERSBURG FL 33709-3112

3. Date Incorporated or Qualified: 10/24/1986  
3a. Date of Last Report: 01/26/1996  
4. FEI Number: 59-2729473  
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  
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country  
2a. Mailing Address: 26 Suite, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country; 30

9. Name and Address of Current Registered Agent  
FOX, GREGORY A., ESQ.  
28050 US 19 N SUITE 100  
CLEARWATER FL 34621

10. Name and Address of New Registered Agent  
81 Name: Joseph Giambalvo  
82 Street Address (P.O. Box Number is Not Acceptable): 1012 Drew Street  
83  
84 City: Clearwater FL 85 Zip Code: 34615

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] DATE: 1/19/97

12. OFFICERS AND DIRECTORS  
1. TITLE: PD  
2. NAME: MITTON-COWAN, HOLLY  
3. STREET ADDRESS: 6435 92ND PL., #803  
4. CITY-ST-ZIP: PINELLAS PARK FL  
5. TITLE: STD  
6. NAME: MITTON, WILLIAM L.  
7. STREET ADDRESS: 10395 TONY CIRCLE  
8. CITY-ST-ZIP: LARGO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 1/14/97 813/544-4285

CR2E034 (9/96)