FILED

Apr 05, 2007 8:00 am Secretary of State **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT** 04-05-2007 90027 044 ****50.00 DOCUMENT # L05000091032

CROSS CREEK MINI STORAGE LLC **60032507** Principal Place of Business Mailing Address 9625 WES KEARNEY WAY 9625 WES KEARNEY WAY RIVERVIEW, FL 33569 RIVERVIEW, FL 33569 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 18191 E. Meadows Road 111<u>1 N. Westshore Blvd</u> Suite, Apt. #, etc. Suite, Apt. #, etc. 03272007 Chg-LLC CR2E083 (12/06) Suite 207 City & State 4. FEI Number Applied For 20-3473886 Not Applicable Tampa, Fl Country Country Zip \$5.00 Additional Zip 5. Certificate of Status Desired Fee Required 33647 33607 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u> Harris Tracy J Jr</u> HARRIS, TRACY J JR Street Address (P.O. Box Number is Not Acceptable)
5115 Joanne Kearney Blvd 9625 WES KEARNEY WAY RIVERVIEW, FL 33569 City Tampa 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Make check payable to Filing Fee Is \$50.00 Due by May 1, 2007 Florida Department of State MANAGING MEMBERS/MANAGERS 10 ADDITIONS/CHANGES 9. ■ Addition TITLE MGR ☐ Delete TITLE MGR **₩**1 Change Harris, Tracy J Jr 5115 JoAnne Kearney Blvd. Tampa, FL 33619 HARRIS, TRACY J JR NAME NAME STREET ADDRESS 9625 WES KEARNEY WAY STREET ADDRESS CITY-ST-ZIP RIVERVIEW, FL 33569 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE MGR TITLE KEARNEY, BING CHARLES W JR NAME Kearney, Bing Charles W Jr 5115 Joanne Kearney Blvd. NAME 9625 WES KEARNEY WAY STREET ADDRESS STREET ADDRESS Tampa, FL 33619 CITY-ST-ZIP RIVERVIEW, FL 33569 CITY-ST-ZIP MGR TITLÉ ☐ Delete TITLE ☐ Change ■ Addition CLG, LLC NAME NAME STREET ADDRESS 1111 N. WESTSHORE BLVD., SUITE 207 STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33617 CITY-ST-ZIP ☐ Addition Delete TITLE TITLE MGR FIRST DOWN, LLC NAME NAME STREET ADDRESS STREET ADDRESS 4510 N. ARMENIA AVE. CITY-ST-ZIP CITY-ST-ZIP **TAMPA, FL 33603** ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

(813)<u>282-91</u>91