2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# L98000003440

Entity Name: PUGH FAMILY LIMITED LIABILITY COMPANY

Current Principal Place of Business:

C/O STORAGE INN OF PENSACOLA
121 NEW WARRINGTON ROAD
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

C/O STORAGE INN OF PENSACOLA
121 NEW WARRINGTON ROAD
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: 59-3552384 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCARTHUR, DEBORAH ANN
3888 PARADISE BAY DRIVE
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	PUGH, RONALD C	
Address:	31216 WOODLAND WAY	
City-St-Zip:	SPANISH FORT, AL 36527	
Title:	MGRM	( ) Delete
Name:	MCARTHUR, DEVAN	
Address:	3888 PARADISE BAY DR	
City-St-Zip:	GULF BREEZE, FL 32561	
Title:	MGRM	( ) Delete
Name:	LABRATO, AMBER	
Address:	3888 PARADISE BAY DR	
City-St-Zip:	GULF BREEZE, FL 32561	
Title:	MGRM	( ) Delete
Name:	PUGH, JAMES R JR	
Address:	5716 BAY FOREST DR	
City-St-Zip:	PENSACOLA, FL 32526	
Title:	MGRM	( ) Delete
Name:	PUGH, JOYCE A	
Address:	5716 BAY FOREST DR	
City-St-Zip:	PENSACOLA, FL 32526	
Title:	MGRM	( ) Delete
Name:	PUGH, JAMES R III	
Address:	5716 BAY FOREST DR	
City-St-Zip:	PENSACOLA, FL 32526	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: RON PUGH MR 04/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date