2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2004
Secretary of State

DOCUMENT# P02000072696

Entity Name: SUNCOAST STORAGE, INC.

Current Principal Place of Business:

5332 MAIN ST
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

5332 MAIN ST
NEW PORT RICHEY, FL 34652

New Mailing Address:

FEI Number: 04-3703602 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALLER, ROLAND D
5332 MAIN ST
NEW PORT RICHEY, FL 34652

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MOORE, MATTHEW
Address: 887 POWDER SPRINGS RD
City-St-Zip: MARIETTA, GA 30064

Title: D ( ) Delete
Name: MOORE, MARTHA
Address: 887 POWDER SPRINGS RD
City-St-Zip: MARIETTA, GA 30064

Title: VSTD ( ) Delete
Name: MOORE, JUDSON
Address: 887 POWDER SPRINGS RD
City-St-Zip: MARIETTA, GA 30064

Title: D ( ) Delete
Name: MOORE, DENNIS L
Address: 887 POWDER SPRINGS RD
City-St-Zip: MARIETTA, GA 30064

Title: D ( ) Delete
Name: MCMULLEN, DANIEL
Address: 4682 EBBTIDE LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: D ( ) Delete
Name: MOORE, DENNIS W
Address: 219 LINDSEY PATH
City-St-Zip: DALLAS, GA 30132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW PHILIP MOORE PRES 03/31/2004

Electronic Signature of Signing Officer or Director — Date