2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

SIGNATURE:

## Mar 03, 2003 8:00 am Secretary of State P02000085613 03-03-2003 90950 040 \*\*\*150.00 **DOCUMENT #** 1. Entity Name STANFORD STORAGE, INC. Mailing Address 7950 118 AVE N Principal Place of Business 7850 118 AVE N LARGO FL 33773 LARGO FL 33773 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number City & State City & State Not Applicable \$8.75 Additional Country Country $\cap$ Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6.-Name and Address of Current Registered Agent Name STANFORD, STEPHEN N Street Address (P.O. Box Number is Not Acceptable) 6340 70 AVE N PINELLAS PARK FL 33781 Zip Code City 3. 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. 14. 1 Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!!: FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. CR2E034 (10/02) ☐ Change ☐ Addition ☐ Delete TITLE TITLE STANFORD, STEPHEN N NAME NAME STREET ADDRESS 6340 70 AVE N STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE STANFORD, SHIRLEY O NAME NAME 6340 70 AVE N STREET ADDRESS STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Defete TITLE STANFORD, JOHNNY NAME NAME 5969 115 AVE N STREET ADDRESS STREET ADDRESS PINELLAS PARK FL 33782 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete STANFORD, DONNY NAME MASAF STREET ADDRESS 7751 64 ST N STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-7/P CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NASSE, GINA NAME NAME 6300 70 AVE N STREET ADDRESS STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ Channe TITLE ☐ Defete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 or supplemental 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 10 or Block 11 if of the corporation or the receiver or trustee changed, or on an attachment with an addr

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