


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 23, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P99000081866 1. Entity Name <b>SAFE &amp; SOUND CLIMATE-CONTROLLED MINI STORAGE, INC.</b>	
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Principal Place of Business <b>3920 CREIGHTON RD          PENSACOLA, FL 32504</b>	Mailing Address <b>PO BOX 11487          PENSACOLA, FL 32524</b>
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03312004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3608769</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**WEST, RENE L  
 1436 EAST OLIVE ROAD  
 PENSACOLA, FL 32514**

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8. 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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

UD00000127193  
 04/23/04-80064-007 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WEST, MILETTE 1436 EAST OLIVE ROAD PENSACOLA, FL 32514
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WEST, RENE L 1436 EAST OLIVE ROAD PENSACOLA, FL 32514
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rene L West* **RENE L WEST, PRESIDENT** Date 4/15/04 Daytime Phone # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR