2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# L03000031053

Entity Name: STORAGE PARTNERS LLC

Current Principal Place of Business:

1546 METROPOLITAN BOULEVARD, #4
TALLAHASSEE, FL 323083775

New Principal Place of Business:

Current Mailing Address:

1546 METROPOLITAN BOULEVARD, #4
TALLAHASSEE, FL 323083775

New Mailing Address:

FEI Number: 32-0099462 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GROW, WILLIAM A JR
1546 METROPOLITAN BOULEVARD, #4
TALLAHASSEE, FL 323083775 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/MEMBERS:

Title:	MGRM	( ) Delete
Name:	GROW, WILLIAM A JR	
Address:	3012 BROOKMONT DRIVE	
City-St-Zip:	TALLAHASSEE, FL 32312	
Title:	MGRM	( ) Delete
Name:	NELSON, TERRY C	
Address:	P.O. BOX 13671	
City-St-Zip:	TALLAHASSEE, FL 32317	
Title:	MGR	( ) Delete
Name:	GLEMBIN, DEBORAH J	
Address:	1733 NESTLEWOOD LANE	
City-St-Zip:	TALLAHASSEE, FL 32301	

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:	

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 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: DEBORAH J. GLEMBIN MGR 04/30/2005

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