

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000114657

**Entity Name:** CSFB 2005-C1 STORAGE PROPERTIES, LLC

**Current Principal Place of Business:**

1601 WASHINGTON AVE SUITE 800  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1601 WASHINGTON AVE SUITE 800  
MIAMI BEACH, FL 33139

**FEI Number:** 27-1457772

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Authorized Person(s) Detail :**

|                 |                               |                 |                               |
|-----------------|-------------------------------|-----------------|-------------------------------|
| Title           | MGR                           | Title           | VP                            |
| Name            | LNR PARTNERS, LLC             | Name            | SHULKIN, ARNOLD               |
| Address         | 1601 WASHINGTON AVE SUITE 800 | Address         | 1601 WASHINGTON AVE SUITE 800 |
| City-State-Zip: | MIAMI BEACH FL 33139          | City-State-Zip: | MIAMI BEACH FL 33139          |

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LNR PARTNERS, LLC, DONNA HARRISON, SPECIAL MANAGER, ROLE OF LNR 03/18/2016  
MANAGER PARTNERS, LLC

Electronic Signature of Signing Authorized Person(s) Detail

Date