

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 377216

FILED
Apr 14, 2005
Secretary of State

Entity Name: STORAGE TRAILER RENTAL, INC.

Current Principal Place of Business:

5310 BROADWAY AVE.
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

Current Mailing Address:

5310 BROADWAY AVE.
JACKSONVILLE, FL 32254 US

New Mailing Address:

FEI Number: 59-1361190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANDAU, F
1501 SAN MARCO BOULEVARD
JACKSONVILLE, FL 32207 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MURRAY, JOHN L.
Address: 14546 LONGVIEW DR S.
City-St-Zip: JACKSONVILLE, FL

Title: D (X) Delete
Name: CATTON, DAVID A.
Address: 1638 W HOLLY OAKS LK RD
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: BELL, A. QUINN,
Address: 1602 TAYO LANE
City-St-Zip: JACKSONVILLE, FL

Title: ST () Delete
Name: TRIPPE, S L
Address: 1270 CUNNINGHAM CREEK DR
City-St-Zip: JAX, FL 32259

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:

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: SANDRA L. TRIPPE

ST

04/14/2005

Electronic Signature of Signing Officer or Director

_____ Date