

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **840599** (5)

1. Corporation Name
PUBLIC STORAGE, INC.

Principal Place of Business	Mailing Address
600 N BRAND BLVD. SUITE 300 PO BOX 25050 GLENDALE CA 91203	600 N BRAND BLVD. SUITE 300 PO BOX 25050 GLENDALE CA 91203

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/04/1978	3a. Date of Last Report 04/14/1994
4. FEI Number 95-2782164	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 100.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
24 Zip	25 Country
28 Zip	29 Country
30	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HUGHES, B WAYNE
STREET ADDRESS	600 N BRAND BLVD #300
CITY - ST - ZIP	GLENDALE CA
TITLE	VD
NAME	GERICH, OBREN
STREET ADDRESS	600 N BRAND BLVD #300
CITY - ST - ZIP	GLENDALE CA
TITLE	VSD
NAME	HORNE, HUGH W.
STREET ADDRESS	600 N BRAND BLVD #300
CITY - ST - ZIP	GLENDALE CA
TITLE	VT
NAME	HAVNER, RONALD. L.JR.
STREET ADDRESS	600 N BRAND BLVD #300
CITY - ST - ZIP	GLENDALE CA
TITLE	VD
NAME	LENKIN, HARVEY
STREET ADDRESS	600 N BRAND BLVD, #300
CITY - ST - ZIP	GLENDALE CA
TITLE	VP
NAME	WEBSTER, JILL L
STREET ADDRESS	600 N. BRAND BLVD. SUITE 300
CITY - ST - ZIP	GLENDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 as indicated, or on an attachment with an address.

SIGNATURE: *Obren B. Gerich* **Obren B. Gerich** 4-20-95 (Date) (810) 244-8080 (Daytime Phone #)