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Apr 21, 1999 8:00 am  
Secretary of State

04-21-1999 90146 016 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 850308

1. Corporation Name

PUBLIC STORAGE, INC.

Principal Place of Business

701 S. WESTERN AVE.  
GLENDALE CA 91201

Mailing Address

P.O. BOX 25025  
DEPT PT  
GLENDALE CA 91201-5025

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1981

4. FEI Number

95-3551121

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME HUGHES, WAYNE B  
STREET ADDRESS 701 S. WESTERN AVE.  
CITY-ST-ZIP GLENDALE CA 91201

TITLE P ☐ DELETE

NAME LENKIN, HARVEY  
STREET ADDRESS 701 S. WESTERN AVE.  
CITY-ST-ZIP GLENDALE CA 91201

TITLE V ☐ DELETE

NAME PHELPS, CARL B  
STREET ADDRESS 701 WESTERN AVENUE  
CITY-ST-ZIP GLENDALE CA 91201

TITLE S ☐ DELETE

NAME HASS, SARAH  
STREET ADDRESS 701 S. WESTERN AVE.  
CITY-ST-ZIP GLENDALE CA 91201

TITLE VST ☐ DELETE

NAME REYES, JOHN  
STREET ADDRESS 701 S. WESTERN AVE.  
CITY-ST-ZIP GLENDALE CA

TITLE VAS ☐ DELETE

NAME GERICH, OBREN D  
STREET ADDRESS 701 S. WESTERN AVE.  
CITY-ST-ZIP GLENDALE CA 91201

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OBREN D. GERICH

Date

Daytime Phone #

4-14-99 (818) 214-8080

CR2E034 (11/98)

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