

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **A00000001989**

1. Entry Name

FLA STOR-A-WAY, LTD.



FILED

03 JUN 23 AM 8:30

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4051 W. STATE ROAD 46

State, Apt. #, etc.

3. Mailing Address

4051 WEST STATE ROAD 46

State, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

City & State

SANFORD, FL

City & State

SANFORD, FL

4. FEI Number

59-3691659

Applied For

Not Applicable

Zip

32771

County

SEMINOLE

Zip

32771

County

SEMINOLE

5. Certificate of Status Obtained ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Name

GARY V. CANNAMONE

Street Address (P.O. Box Number is Not Acceptable)

4051 W. STATE ROAD 46

City

SANFORD

State

FL

Zip Code

32771

8. The above named entity warrants this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, the person named.

SIGNATURE

[Signature]

5/1/2003

9. Capital Contributions as Stated on Report

0.00

10. Amount of Capital Contributions in FLORIDA to date

0.00

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **USA FLORIDA STOR-A-WAY, INC**
NAME **4051 W. STATE ROAD 46**
STREET ADDRESS **SANFORD, FL. 32771**
CITY-STATE-ZIP

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STAMP: 800019320398 05/19/03--01061--015 **541.25
STAMP: 800019320398 06/27/03--01039--020 **1382.50
DO NOT WRITE IN THIS SPACE
REINSTATEMENT 01-03
[Signature]

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath that I am a General Partner of the limited partnership or the receiver or trustee authorized to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:

[Signature]

GARY V. CANNAMONE, REC. 5/1/03 407-302-4079

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

USA FLORIDA STOR-A-WAY INC.

Date

Printed Name

STAPLE CHECK HERE

ORIGINAL SENT TO



Paving The Way To Better Storage Solutionssm

Richard E. Cardamone

Friday, June 20, 2003

Secretary Of State
Division Of Corporations
409 East Gaines Street
Tallahassee, FL 32399
Attn: Ms. Diane Cushing

Dear Diane-

Thank you for your time on the phone today. Attached you will find the Uniformed Business Report for FLA Stor-A-Way, LTD and a check in the amount of \$1382.50 (the remaining balance owed based on your letter dated June 13, 2003).

Amount owed:	\$1923.75
Amount paid:	<u>\$541.25</u>
Balance to be paid:	\$1382.50

Thanks in advance for your assistance. I would truly appreciate your help with an expedited filing in order to get this entity back in good standing.

Sincerely,

A handwritten signature in cursive script, appearing to read "Richard E. Cardamone", followed by a horizontal line.

Richard E. Cardamone
Chief Operations Officer
USA Stor-A-Way, Inc.

CC: Robert Porche Jr.