


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
May 06, 2005 08:00 AM
Secretary of State**

DOCUMENT # A0100000090
1. Entity Name
USA STOR-A-WAY AT DAVIS ROAD, LTD.



Principal Place of Business Mailing Address
4051 WEST S.R. 46 4051 WEST S.R. 46
SANFORD, FL 32771 SANFORD, FL 32771

2. Principal Place of Business 3. Mailing Address

Suite, Apt #, etc. Suite, Apt #, etc.

City & State City & State

Zip Country Zip Country



04202005 Chg-LP CR2E003 (10/03)

4. FEI Number Applied For
59-3694457 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARDAMONE, GARY V
4051 W. STATE ROAD 46
SANFORD, FL 32771

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and the if applicable

9. Capital Contributions as Shown on record. \$1,900,540.00 10. Amount of Capital Contributions in FLORIDA to date. \$1,900,540.00

**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

13. ADDRESS CHANGES ONLY

DOCUMENT # P01000006009
NAME USA STOR-A-WAY GP, INC.
STREET ADDRESS 4051 WEST S.R. 46
CITY-ST-ZIP SANFORD, FL 32771

STREET ADDRESS
CITY-ST-ZIP 000000363757
05/06/05-80012-002 526.25

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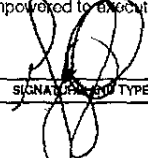
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STREET ADDRESS
CITY-ST-ZIP

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:  Gary V. Cardamone, President of General Partner 4/28/05 407-321-5811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #