


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A02000000465 1. Entity Name USA STOR-A-WAY AT HERNDON, LTD.	
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Principal Place of Business 4501 WEST STATE ROAD 46 SANFORD, FL 32771	Mailing Address 4501 WEST STATE ROAD 46 SANFORD, FL 32771
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2. Principal Place of Business 4051 W. STATE ROAD 46 Suite, Apt. #, etc.	3. Mailing Address 4051 W. STATE ROAD 46 Suite, Apt. #, etc.
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City & State SANFORD, FL Zip 32771 Country USA	City & State SANFORD, FL Zip 32771 Country USA
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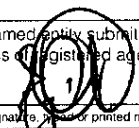
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



01292004 Chg-LP CR2E003 (10/03)

6. Name and Address of Current Registered Agent WRIGHT, MICHAEL E 301 EAST PINE STREET, SUITE 1400 ORLANDO, FL 32801	7. Name and Address of New Registered Agent Name GARY V. CARDAMONE Street Address (P.O. Box Number is Not Acceptable) 4051 W. STATE ROAD 46 City SANFORD FL Zip Code 32771
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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  **GARY V. CARDAMONE** DATE **4/26/04**

9. Capital Contributions as Shown on record. \$680,990.00	10. Amount of Capital Contributions in FLORIDA to date. \$680,990.00
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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 # L02000007437 NAME USA STOR-A-WAY HERNDON GP, LLC STREET ADDRESS 4501 WEST STATE ROAD 46 CITY-ST-ZIP SANFORD, FL 32771	STREET ADDRESS 4051 W. STATE ROAD 46 CITY-ST-ZIP SANFORD, FL 32771
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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 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 GP** DATE **4/26/04** DAYTIME PHONE # **407-321-5811**

STAPLE CHECK HERE