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	1721	AT AND ETIMO THIS EO	, DNA
PLEASE	$UI \supset I$	RE COMPLETING THIS FO	rivi.
LIMITED	FLORIDA DEPARTA OF TA	FILED	
PARTNERSHIP REINSTATEMENT	Secretary of State	SECRETARY OF DIVISION OF CORE	· STATE PORATIONS
	<u> </u>	OI MAY 21 PI	1: 35
DOCUMENT # #0 7 3	¹³ 4/29/00		:
Public Storage F.	Darby Lin Vila	40000043	3387543 701-01092014
PUDITE STOTAGE F	-U5/U1 ***15	701 -01032 014 52.50 ***1552.50	
	3. Mailing Office Address	4. Date Formed or Registered To Do Business in Florida	
	701 Western Amoure Suite, Apt. #, etc.	5. FEI Number	Applied For Not Applicable
#20D	#200 City & State	6. CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required
Glendale CA	Glendale, CA	7a. Capital Contributions as shown o	for a Certificate of Status
71201 Country 45A	Zip . Country 4120/ 434	22,000 7b. Amount of Capital Contributions	,000
8. Name and Address of C	Current Registered Agent	· ·	5,602
in 7h with a mic			S: \$7 per \$1,000 on amount entered :2.50 and a maximum of \$437.50,
Street Address (P.O. Box Number is Not Acceptable)	for each year due this office. 2.) Supplemental Fee(s): \$88.75 for each	1	
Suite, Apt. #, Etc.		with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for	
Tallahassee	State Zip Code FL 32301—25	Note: If the amount entered in 7b is 7a, a supplemental affidavit must be and appropriate filing fee.	greater than amount entered in submitted along with a separate
9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered			
agent. I am familiar with, and accept the obligations of sec	tion 620.192, Florida Statutes.	400004 -06/0:	i/0101092015
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
BWH Marina Coperation II	701 Western Are.	Celendale (1A 9120)	+9400002430
Public Storage, Fre.	701 Western Arr.	Gladale CA 91201	850308
MADIC Moragi, Fre.	Penc	ety 1000.00 -	00-01
	30	01 437.50	
, brillotateles	Supf	u's 177.50	<u> </u>
REINSTATEME	<u> 2000-01</u>	2062,50	in
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.			
11. I do hereby certify that the information supplied with this Corporations from any liability of non-compliance with on this annual report is true and accurate and that my trustee empowered to execute this report as required to	Section 119.07(3)(i) in the event that the information sup signature shall have the same legal effects as if made u by chapter 620, Florida Statutes.	oplied is deemed exempt from public access. I furthe ander oath, I further centify that I am a General Partner	r certify that the information indicated
SIGNATURE 777	Moffett	orporate Gen. Partner Vice President DATE	3/30/0,
Typed or Printed Name of General Partner Signing Form	Middle mosgitt	Z Telephone Number	18-244-8080