

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # A13886

1. Entity Name
PUBLIC STORAGE EURO PARTNERSHIP VI, LTD.



Principal Place of Business
701 WESTERN AVENUE, 2ND FLOOR
GLENDALE, CA 91201

Mailing Address
701 WESTERN AVENUE, 2ND FLOOR
GLENDALE, CA 91201

DO NOT WRITE IN THIS SPACE



04132006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
95-3806392

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331

DO NOT WRITE
IN THIS SPACE

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

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

DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

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

DOCUMENT # **850308**
NAME **PUBLIC STORAGE INC.**
STREET ADDRESS **701 WESTERN AVENUE**
CITY-ST-ZIP **GLENDALE, CA 91201**

DOCUMENT #
NAME **HUGHES, B. WAYNE**
STREET ADDRESS **701 WESTERN AVENUE**
CITY-ST-ZIP **GLENDALE, CA 91201**

DOCUMENT # **F96000002628**
NAME **HFAC TWO, INC.**
STREET ADDRESS **701 WESTERN AVENUE**
CITY-ST-ZIP **GLENDALE, CA 91201**

DOCUMENT #
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CITY-ST-ZIP

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U00000531708
05/06/06-80055-010 500.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Drew Adams
Drew Adams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Corporate Gen. Partner
Vice President

4/12/06

818 244 8080

Date

Daytime Phone #