FILED

03 JAN 29 PM 12: 21

SECRETARY OF STATE-TALEAHASSEE, FLORIDA

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

Mailing Address
701 WESTERN AVENUE, 2ND FLOOR

DOCUMENT # A13886

1. Entity Name

CITY-ST-ZIP

Principal Place of Business

701 WESTERN AVENUE, 2ND FLOOR

PUBLIC STORAGE EURO PARTNERSHIP VI, LTD.



GLENDALE CA 91201 **GLENDALE CA 91201** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2003** City & State City & State 4. FEI Number Applied For 95-3806392 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) **526 EAST PARK AVENUE** TALLAHASSEE FL 32301 City 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 Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$12,500,000.00 in FLORIDA to date. 12,500,000.00 as Shown on record. 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY 850308 DOCUMENT # STREET ADDRESS PUBLIC STORAGE INC. NAME 701 WESTERN AVENUE STREET ADDRESS CITY-ST-7IP **GLENDALE CA 91201** CITY-ST-7(P DOCUMENT # STREET ADDRESS HUGHES, B. WAYNE NAME 701 WESTERN AVENUE STREET ADDRESS CITY-ST-ZIP **GLENDALE CA 91201** CITY-ST-ZIE F96000002628 DOCUMENT # **700011194**227 /29/03--01094--009 **57 STREET ADDRESS HFAC TWO, INC. 701 WESTERN AVENUE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP GLENDALE CA 91201 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP

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

SIGNATURE: STANDURED 1-21-

the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

-21-03

(818) 244-8080

Davimo Phono #

CR2E003 (10/02)