

**FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

FILED

07 DEC -8 PM 12: 06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #  
**A13987**



**PUBLIC STORAGE EURO PARTNERSHIP V, LTD.**

*98-AR CM*

Mailing Address

Principal Office Address

~~P.O. BOX 198400-  
NASHVILLE TN 37219-0400~~

701 WESTERN AVE., 2ND FL  
GLENDALE CA 91201-2397

*3360 CUMBERLAND CIRCLE STE. 1500  
ATLANTA, GA 30339*

*\$ 156.25*

3. Date Formed or Registered

02/09/1983

5a. Capital Contributions as Shown on record.

\$3,550,000.00

3a. Date of Last Report

10/08/1996

5b. Amount of Capital Contributions in FLORIDA to date:

*0.*

4. State or Country of Formation

CA

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. FEI Number

95-3729105

Applied For  
 Not Applicable

7. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. 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 section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/Document Number

PUBLIC STORAGE INC.

600 N. BRAND BOULEVAR

GLENDALE CA

850308

HUGHES, B. WAYNE

600 N. BRAND BOULEVAR

GLENDALE CA

G & A STORAGE CORP.

222 3RD AVE N, STE 37

NASHVILLE TN

F93000001064

800002374998-1  
-12/17/97-01063-004  
\*\*\*\*625.00 \*\*\*\*156.25

**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

*Melanie Bunting*  
Melanie Bunting

DATE

12-2-97

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

770)418-3500

CR2E003 (6/97)