2001	i-UNIFO	RM BUSI	NESS REPO	RT	(UBI	R)					
DOCU 1. Entity Nam	MENT #	A23654	4.			,		: · · · · · · · · · · · · · · · · · · ·	•		
FT. PIERCE STORAGE LTD.						-			ED	•	
Principal Place 1375 W. HILLS DEERFIELD BE	BORO BLVD.	n = -	Mailing Address 1375 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33442				SECRETARY OF STATE				
Principal Place of Business     3. Mailing Address											
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			١,	DO NOT WRITE IN THIS SPACE				
City & State			City & State	City & State			4. FEI Numb	er <b>59-27522</b> 6	<b>38</b>	Applied For Not Applicable	
Zip \	\		Zip					of Status Desired	· /A	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					Name		7. Name and	Address of New	Registered A	gent	
ANDÉRSON, LARRY W 1375 W. HILLSBORO BLVD.					Street Address (P.O. Box Number is Not Acceptable)						
DEERFIELD BCH. FL 33442					City	City Zip Code					
8. The above named entity submits this statement for the purpose of changing its re					<u></u>	registered	d agent, or bot	th, in the State of	FL Florida.		
SIGNATURE _						_	_		DATE		
9. Capital Contributions as Shown on record.  \$600,000.00  10. Amount of Capit in FLORIDA to d											
	A GENE NOTE: Ger	eral Partners MAY	AT IS A BUSINESS EN NOT be changed on the	TITY M ne form	UST BE F	REGISTE ndment	RED AND A	d to change a	general parti	ner.	
12. GENERAL PARTNER INFORMATION  DOCUMENT /					_ <del></del> _			ADDRESS C	HANGES ONL	<u> </u>	
NAME STREET ADDRESS	ANDERSON, LARRY W 1375 W. HILLSBORO BLVD				ET ADORESS - ST-ZIP	·····	<b>4000033364941</b> -04/13/0101031021				
DOCUMENT #	ANDERSON, ROBERT W				ET ADDRESS			**** ·	*535 <b>.</b> 00	****535.UU	
	1375 W. HILLSBORO BLVD. DEERFIELD BEACH FL				-ST-ZIP						
NAME	F93000002786 AMER. REALTY MGMT CORP				ET ADDRESS						
CITY-ST-ZIP	DEERFIELD BEACH FL				-ST-ZIP			<del>=</del>			
NAME					ET ADDRESS		~				
	DEERFIELD BEA			-	-ST-ZIP						
	AIOLIOON, NORMAN L				ET ADDRESS		4. H -		w.=		

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

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

DEERFIELD BEACH FL 33442

CITY-ST-ZIP

DOCUMENT #

CITY-ST-ZIP

NAME STREET ADDRESS

A II UL a SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER