


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

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 APR -8 PM 3:16	
1. Name of Limited Partnership PINES WEST STORAGE PARTNERS, LTD. c/o Collum Management Corp. 540 SW 27th Avenue Fort Lauderdale, Florida 33312 Attention: Richard Collum, President		1a. DOCUMENT # A96000000484			
Mailing Address c/o Richard Collum Collum Management Corp. 540 SW 27th Avenue Fort Lauderdale, FL 33312		Principal Office Address c/o Richard Collum Collum Management Corp. 540 SW 27th Avenue Fort Lauderdale, FL 33312		3. Date Formed or Registered 3/13/96	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		3a. Date of Last Report	
				4. State or Country of Formation Florida	
				5a. Capital Contributions as Shown on record \$900,000.00	
				5b. Amount of Capital Contributions in FLORIDA to date \$900,000.00	
				6. FEI Number 65-0648411 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
				7. Certificate of Status Desired <input checked="" type="checkbox"/> \$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 Collum management Corp 540 SW 27th Avenue Fort Lauderdale, FL 33312				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) <i>Richard M. Collum</i> DATE 4/7/98					
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) Collum Management Corp. 540 SW 27th Avenue Fort Lauderdale, FL 33312 Attention: Richard Collum, Pres.		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 540 SW 27th Avenue Fort Lauderdale, FL 33312		11b. City, State & Zip Code Fort Lauderdale, FL 33312	
				11c. Registration/Document Number P96000006202	
				800002482808--1	
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 <i>Richard M. Collum</i> DATE 4/7/98					
Typed or Printed Name of General Partner Signing Form Daytime Telephone Number					

CR2E003 (6/97)



ACCOUNT NO. : 072100000032

REFERENCE : 773768 82400A

AUTHORIZATION :

Patricia Pyjunt

COST LIMIT : \$ 535.00

ORDER DATE : April 8, 1998

ORDER TIME : 12:13 PM

ORDER NO. : 773768-005

CUSTOMER NO: 82400A

CUSTOMER: Ms. Janet S. Rice
Morgan Olsen & Olsen
Suite 200
315 N.e. Third Avenue
Ft. Lauderdale, FL 33301

ANNUAL REPORT FILING

NAME: PINES WEST STORAGE PARTNERS,
LTD.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
X PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrew Cumper

EXAMINER'S INITIALS:

99 APR -8 PM 1:08
DIVISION OF CORPORATION