2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED Apr 27, 2005 08:00 AM Secretary of State

DOCUMENT # A9600000484 1. Entity Name PINES WEST STORAGE PARTNERS, LTD.				Secretary of State
Principal Place % RICHARD CO 540 SW 27TH FORT LAUDERI	DLLUM	Mailing Address % RICHARD COLLUM 540 SW 27TH AVENU FORT LAUDERDALE, I		- AND CONT. THE PARTY WITH A STATE AND THE S
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04112005 Chg-LP CR2E003 (10/03)
City & State		City & State		4. FEI Number Applied For 65-0648411 Not Applicab
Zip	Country	Ziρ	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	5. Name and Address of Cu	rrent Registered Agent	Name	7. Name and Address of New Registered Agent
COLLUM MANAGEMENT CORP. 540 S.W. 27TH AVENUE FORT LAUDERDALE, FL 33312			Street A	Address (P.O. Box Number is Not Acceptable)
	. = ====		City	FL Zip Code
	named entity submits this statem rns of registered agent.	ent for the purpose of changing i	its registered office o	or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	ignature, typed or printed name of registered	d agent and title if applicable.		DATE
9. Capital Cont as Shown or		t6. Amount of Cap in FLORIDA to		
				E REGISTERED AND ACTIVE WITH THIS OFFICE. nendment must be filed to change a general partner.
12.	GENERAL PAR	TINER INFORMATION	13.	ADDRESS CHANGES ONLY
1	P96000006202 COLLUM MANAGEMENT C	ORP.	STREET ADDRESS	5
i i	540 S.W. 27TH AVENUE FORT LAUDERDALE, FL 3	3313	CATY-ST-ZIP	
DOCUMENT# NAME	TORY BASERDALL, RES		STREET ADDRESS	04/27/05-80005-009 526.25
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NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS City-St-Zip	S
L	ertify that the information supplies on this report is true and accurate or or trustee empowered to exec	ed with this filing does not qualify the and that my signature shall have ute this report as required by Ch	for the exemption sure the same legal effe apter 620, Florida Sta	stated in Section 119.07(3)(i), Florida Statules, I further certify that the information iffect as if made under each, that I am a General Partner of the limited partnership statutes
SIGNATI	URE: Signature and ty	PED OR FERNIED NAME OF SIGNING GEN	Richar	CO M. Collvin 4/11/05 854-583-1044-