FROM : AUGUST COMITER KULUNAS SCHEPPS

PHONE NO. : 4078359602

A96000001755

FILE ON OR BEFORE DECEMBER 31 OF EACH YEAR OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION PURSUANT TO SECTION 620.1525 F.S.

A96000001755

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JAN -2 AM 9:51

LIMITED PARTNERSHIP ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

KISSIMMEE STORAGE PARTNERS, LTD.

1a. DOCUMENT #
A96000001755

BK 1/14/97

Mailing Address	Principal Office Address
3300 PGA BLVD STE # 620 PALM BEACH GARDENS FL 33410-2811	3300 PGA BLVD STE # 620 PALM BEACH GARDENS FL 33410-2811

3. State Formed or Registered: 9/23/96

3a. Date of Last Report: 9/23/96

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on record: 524400.00

5b. Amount of Capital Contributions in FLORIDA to date: 524400.00

2. Mailing Address	2a. Principal Office Address
3300 PGA BLVD	3300 PGA BLVD
Suite, Apt. #, etc.: STE # 620	Suite, Apt. #, etc: STE # 620
City & State: PALM BEACH GARDENS FL	City & State: PALM BEACH GARDENS FL
Zip: 33410-2811 Country: USA	Zip: 33410-2811 Country: USA

6. FEI Number: 65-0702147 ☐ 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	10. If changed, new Registered Agent/Office
COMAC KISSIMMEE, INC. 3300 PGA BLVD, 620 PALM BEACH GARDENS, FL 33410-2811	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 620.152, 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
COMAC KISSIMMEE, INC.	3300 PGA BLVD 620	PALM BEACH GARDENS FL 33410-2811	P96000077839

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****576.25 ****576.25

CR2E003 (6/96)

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 _____ DATE _____

Typed or Printed Name of General Partner Signing Form: PETER V COWIE Daytime Telephone Number: 561-775-7393