2003 LIMITED PARTNERSHIP NESS REPORT (UBR)

DOCUMENT #

1. Entity Name TWENTY-FOUR SAC SELF-STORAGE LIMITED PARTNERSHIP



Principal Place of Business Mailing Address

FILED 2003 JUL 22 PM 2: 42

2721 NORTH CENTRAL AVE. PHOENIX AZ 85004		2721 NORTH CE PHOENIX AZ 85			TALLAHASSEE, FLORIDA			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		DUE BY MAY 1, 2003			
City & State		City & State		4. FEI Number 75-3026682		F	Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired		\$8.75 Fee Req	Additional quired
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
C T CORPORATION SYSTEM				Name (DO S. All () All ()				
1200 SOUTH PINE ISLAND ROAD			Street Address (P.O. Box Number is Not Acceptable)					
PLANTATION	FL 33324							
				City		FL	Zip (Code
	med entity submits this statem	ent for the purpose of ch	anging its register	red office or reg	gistered agent, or both, in the State of Flor	rida. I am	familiar w	vith, and accept

9. Capital Contributions

as Shown on record

Signature, typed or printed name of registered agent and title if applicable.

\$1,100,000.00

10. Amount of Capital Contributions \$1,108,112.083 in FLORIDA to date.

DATE

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12.	GENERAL PARTNER INFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT # NAME	F02000001985 TWENTY-FOUR SAC SELF-STORAGE GP CORP.	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	715 SOUTH COUNTRY CLUB DRIVE MESA AZ 85210	CITY-ST-ZIP	
DOCUMENT # NAME	,	STREET ADDRESS	800021713978 07/22/0301010004 **926.25
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME	•	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME	·	STREET ADDRESS	•
STREET ADDRESS CITY-ST-ZIP	TREMO	CITY-ST-ZIP	
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	

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

SIGNATURE: Mark v. Shoen

7/7/2003

602-263-6195

Storage GP Corporate Annone #