

Division of Corporations

Page 1 of 1

B94000000454

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H07000138597 3)))



H070001385973ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 205-0380

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5926

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 MAY 22 AM 8:36

FILED

MST

REGISTERED AGENT CHANGE

STORAGE TRUST PROPERTIES LIMITED PARTNERSHIP

RECEIVED  
07 MAY 22 AM 8:00  
DIVISION OF CORPORATIONS

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

### LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Storage Trust Properties Limited Partnership  
Name of the limited partnership

2. 11/09/1994 3. 894000060454  
Date of filing/registration in Florida Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:  
NRAI Services, Inc. Name  
2731 Executive Park Address  
Weston, FL 33331 City, State and Zip

5. The name and address of the new registered agent and/or officer:  
C T Corporation System Name  
1200 South Pine Island Road Florida street address (P.O. Box not acceptable)  
Plantation FL 33324 City, State and Zip

6. Such change(s) was/were authorized by the general partners.

Donald H. Bozway Vice President of Corporate General Partner  
Signature of General Partner

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.*

Donald H. Bozway Signature of Registered Agent  
**Donald H. Bozway** Assistant Secretary

Make checks payable to Florida Department of State and mail to:  
Division of Corporations, P.O. Box 6127, Tallahassee, FL 32314  
Filing Fee: \$35.00

DKHSD(04/95)

FORM - 12/22/04 - C T System Online

FILED  
07 MAY 22 AM 8:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA