2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Apr 11, 2006 08:00 AM Secretary of State

DOCUMENT	#B95000000427
1. Entity Name	

1. Entity Name DEVON/OCALA, LIMITED PARTNERSHIP



Principal Place of Business 2401 SW 17TH ROAD

OCALA, FL 34474

STAPLE CHECK HERE

SIGNATURE: .

Mailing Address

2000 POWELL STREET, SUITE 1240 EMERYVILLE, CA 94608



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04052006 Na Chg-LP

CR2E003 (11/05)

4. FEI Number 94-3224860 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of changing its reg the obligations of registered agent.		istered affice or registered agent, or both, in the State of Florida. I am familiat with, and accept. U00000503553 04/26/06-80037-010, 500, 60		
SIGNATURE -	Signature, typed or printed name of registered agent and title if applicable.		DATE	
FILE NOW!!! FEE !3 \$500.00 After May 1, 2006, Fee will be \$900.00				
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			
OGCUMENT P NAME STREET ADDRESS CITY-ST-ZIP	M02000002971 DEVON SELF STORAGE HOLDINGS (US) LLC 2000 POWELL STREET, SUITE 1240 EMERYVILLE, CA 94608		·	
DOCUMENT # NAME STREET ADDRESS CHY-SJ-ZIP				
DOCUMENT / NAME STREET ADDRESS CITY - ST - ZIP	·	<i>-</i>	OT WRITE	
DOGUMENT / NAME STREET ADDRESS GITY-ST-ZIP		INIH	IIS SPACE	
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP				
DOCUMENT / NAME STREET ADDRESS CITY-SY-ZVP				
14. It hereby certify that the information Supplied with this-Ming does not qualify for the exemptions contained in Chapter 119, 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				