
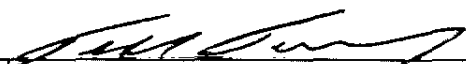


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
Mar 18, 2005 08:00 AM
Secretary of State**

DOCUMENT # B96000000299			
1. Entity Name U-STORE-IT, L.P.			
Principal Place of Business 6745 ENGLE ROAD, SUITE 300 MIDDLEBURG HEIGHTS, OH 44130		Mailing Address 6745 ENGLE ROAD, SUITE 300 MIDDLEBURG HEIGHTS, OH 44130	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>			
9. Capital Contributions as Shown on record. \$12,659,517.00		10. Amount of Capital Contributions in FLORIDA to date.	
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 #	D04000000048	STREET ADDRESS	
NAME	U-STORE-IT TRUST	CITY-ST-ZIP	
STREET ADDRESS	6745 ENGLE ROAD		
CITY-ST-ZIP	CLEVELAND, OH 44130		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
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: 		3/7/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Todd Towsley, Vice President		Date	
		(440) 234-0700 Daytime Phone #	



01052005 Chg-LP CR2E003 (10/03)

4. FEI Number 34-1837021 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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03/18/05 00000 012 526.25

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