



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 15, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # F00000001086 1. Entity Name CAPITOL SELF STORAGE, INC.	
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Principal Place of Business 201 NORTH ILLINOIS, SUITE 2300 INDIANAPOLIS, IN 46204-1950	Mailing Address 201 NORTH ILLINOIS, SUITE 2300 INDIANAPOLIS, IN 46204-1950
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**DO NOT WRITE IN THIS SPACE**

	
02262004 No Chg-P	CR2E034 (10/03)
4. FEI Number 35-2102483	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000113852 04/15/04-80026-010 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BROADBENT, GEORGE P 201 NORTH ILLINOIS, SUITE 2300 INDIANAPOLIS, IN 462041950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRADLEY, JOYCE A 201 NORTH ILLINOIS, SUITE 2300 INDIANAPOLIS, IN 462041950
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**DO NOT WRITE IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joyce A. Bradley Joyce A. Bradley 3/2/04 (317)  
Date Daytime Phone #