

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
F00000005800

DOCUMENT # F00000005800

1. Corporation Name  
STORAGWORLD PROPERTIES GP NO. 4 CORP.

Principal Place of Business  
C/O STORAGWORLD. L.P.  
33 SOUTH CATALINA AVE., SUITE 201  
PASADENA CA 91106

Mailing Address  
C/O STORAGWORLD. L.P.  
33 SOUTH CATALINA AVE. SUITE 201  
PASADENA CA 91106

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable  
4754 State Rd 64 East  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable  
4754 State Rd 64 East  
Suite, Apt. #, etc.

City & State  
Bradenton, FL

City & State  
Bradenton, FL

Zip  
34208

Country  
U.S.A.

Zip  
34208

Country  
U.S.A.

FILED  
02 DEC 20 PM 5:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

900009701799  
12/26/02--01073--016 \*\*750.00

4. Date Incorporated or Qualified To Do Business in Florida  
10/17/2000

5. FEI Number  
95-4825798

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PCD	HORNE, HUGH W	33 SOUTH CATALINA AVE., SUITE 20	PASADENA CA 91106
VD	POTTER, MARK B	WORLD TRADE CENTER, TWO SEAPORT	BOSTON MA 02210
S	FINNEGAN, JAMES J	WORLD TRADE CENTER, TWO SEAPORT	BOSTON MA 02210
T	FOGARTY, ELIZABETH	WORLD TRADE CENTER, TWO SEAPORT	BOSTON MA 02210
D	CHADWICK, WILLIAM J	11601 WILSHIRE BLVD., SUITE 2240	LOS ANGELES CA 90025
D	DAVIDSON, MARC L	WORLD TRADE CENTER, TWO SEAPORT	BOSTON MA 02210

8. Name and Address of Current Registered Agent  
C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324


9. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
State  
Zip Code

REINSTATEMENT Etc. 2002

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent  
James A. Bordonaro  
Assistant Secretary  
Date 11/18/02  
REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date 11/21/02  
Daytime Phone # (26) 683-3352