

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000002674 (0)

1. Corporation Name

STORAGE USA REALTY, INC.



Principal Place of Business

6799 GREAT OAKS RD
STE 207
MEMPHIS TN 38138
US

Mailing Address

6799 GREAT OAKS RD
STE 207
MEMPHIS TN 38138
US

3. Date Incorporated or Qualified
06/04/1993

3a. Date of Last Report
07/28/1995

2. Principal Place of Business

2a. Mailing Address

21 6075 Poplar Avenue

26 6075 Poplar Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 229

27 Suite 229

City & State

City & State

23 Memphis, Tenn

28 Memphis, TN

Zip 38119

Country USA

Zip 38119

Country USA

4. FEI Number

52-1697256

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CP ☐ DELETE

NAME JERNIGAN, DEAN
STREET ADDRESS 6799 GREAT OAKS RD STE 207
CITY-ST-ZIP MEMPHIS TN

TITLE VC ☐ DELETE

NAME CONWAY, MICHAEL
STREET ADDRESS 10 CORPORATE CENTER, SUITE 400
CITY-ST-ZIP COLUMBIA MD 21044

TITLE S ☐ DELETE

NAME ERICKSON, JOHN R
STREET ADDRESS 10 CORPORATE CENTER, SUITE 400
CITY-ST-ZIP COLUMBIA MD 21044

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CP ☒ Change ☐ Addition

1.2 NAME Jernigan, Dean
1.3 STREET ADDRESS 6075 Poplar Avenue, Ste. 229
1.4 CITY-ST-ZIP Memphis, TN 38119

2.1 TITLE VC ☒ Change ☐ Addition

2.2 NAME Conway, Michael
2.3 STREET ADDRESS 10440 Little Patuxent Pky. Ste. 1100
2.4 CITY-ST-ZIP Columbia, MD 21044

3.1 TITLE S ☒ Change ☐ Addition

3.2 NAME Erickson, John R.
3.3 STREET ADDRESS 10440 Little Patuxent Pky. Ste. 1100
3.4 CITY-ST-ZIP Columbia, MD 21044

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DEAN JERNIGAN

4-17-96

901-762-0000

Date

Daytime Phone #

CR2E034 (12/95)