

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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DOCUMENT # F95000006310

1. Entity Name

Iron Mountain Information Management, Inc.



FILED

03 JUN 20 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

745 Atlantic Avenue

Suite, Apt. #, etc.

3. Mailing Address

745 Atlantic Avenue

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Boston, MA

City & State
Boston, MA

4. FEI Number 04-3038591

Applied For
Not Applicable

Zip
02111

Country
USA

Zip
02111

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

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

1201 Hays Street

City
Tallahassee

FL Zip Code
32301

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

Deborah D. Skipper

Deborah D. Skipper
Asst. V. Pres.

6/23/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President and Sole Director
C. Richard Reese
745 Atlantic Avenue
Boston, MA 02111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President and Secretary
Garry B. Watzke
745 Atlantic Avenue
Boston, MA 02111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
John P. Lawrence
745 Atlantic Avenue
Boston, MA 02111

TITLE
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CITY-ST-ZIP
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CITY-ST-ZIP

**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 on an attachment with an address, with or other like empowered.

SIGNATURE:

Garry B. Watzke

Garry B. Watzke

6-18-03

617 535 4702

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)



CORPORATION SERVICE COMPANY™

Page 2 of 2

ACCOUNT NO. : 072100000032

REFERENCE : 138079 4321862

AUTHORIZATION :

Patricia Pigute

COST LIMIT : \$ 558.75

ORDER DATE : June 18, 2003

ORDER TIME : 10:44 AM

ORDER NO. : 138079-010

CUSTOMER NO: 4321862

CUSTOMER: Jeremy L. Lewis, Esq
Iron Mountain Information
Floor 10th
745 Atlantic Avenue
Boston, MA 02111

RESUBMIT
Please give original
submission date as file date.

ANNUAL REPORT FILING

NAME: IRON MOUNTAIN INFORMATION
MANAGEMENT, INC

RECEIVED
03 JUN 20 AM 11:52
DIVISION OF CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - Ext. 1114

EXAMINER'S INITIALS: _____