

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000069

Entity Name: SMARTSTOP, INC.

FILED
Jan 27, 2007
Secretary of State

Current Principal Place of Business:

333 SW TAYLOR ST
3RD FLOOR
PORTLAND, OR 972042446 US

New Principal Place of Business:

Current Mailing Address:

333 SW TAYLOR ST
3RD FLOOR
PORTLAND, OR 972042446 US

New Mailing Address:

FEI Number: 91-1839911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRAM, MARK
Address: 333 SW TAYLOR, 3RD FLOOR
City-St-Zip: PORTLAND, OR 972042446

Title: D () Delete
Name: GRIFFIN, MARK
Address: 5202 4TH STREET
City-St-Zip: LUBBOCK, TX 79408

Title: D () Delete
Name: FREDERICK, JUBITZ
Address: 33 NE MIDDLEFIELD RD.
City-St-Zip: PORTLAND, OR 97205

Title: AT () Delete
Name: PETERSEN, BRYAN
Address: 315 SW FIFTH AVE STE 600
City-St-Zip: PORTLAND, OR 97204

Title: D () Delete
Name: BAUMAN, LAWRENCE
Address: 5440 SW WESTGATE DR STE 150
City-St-Zip: PORTLAND, OR 97221

Title: D () Delete
Name: HAYDEN, DON
Address: 315 SW FIFTH AVE STE 600
City-St-Zip: PORTLAND, OR 97204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK GRAM

PD

01/27/2007

Electronic Signature of Signing Officer or Director

Date