

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 01, 1999 8:00 am**  
**Secretary of State**

04-01-1999 90051 032 \*\*\*150.00

**DOCUMENT # F 98000006865**

1. Corporation Name

Amsdell Holdings I, Inc.

Principal Place of Business

Mailing Address

6745 Engle Road, Suite 300  
Middleburg Heights, Ohio 44130

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

1 Suite, Apt. #, etc.

Suite, Apt. #, etc.

2 City & State

City & State

3 Zip

Country

Zip

Country

4

9. Name and Address of Current Registered Agent

CT Corporation System  
1200 Pine Island Road  
Plantation, Florida 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 withdrawing)

DATE

12. OFFICERS AND DIRECTORS

TITLE President/Treasurer/Director ☐ DELETE

NAME Robert J. Amsdell

STREET ADDRESS 6745 Engle Road, Suite 300

CITY-ST-ZIP Middleburg Heights, Ohio 44130

TITLE Vice President/Director ☐ DELETE

NAME Barry L. Amsdell

STREET ADDRESS 6745 Engle Road, Suite 300

CITY-ST-ZIP Middleburg Heights, Ohio 44130

TITLE Secretary ☐ DELETE

NAME Steven G. Osgood

STREET ADDRESS 6745 Engle Road, Suite 300

CITY-ST-ZIP Middleburg Heights, Ohio 44130

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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: By:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert J. Amsdell, President

3/2/99

440-234-0700