

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F99000001567

FILED
Mar 21, 2002 8:00 AM
Secretary of State

Entity Name: SEVEN SAC SELF-STORAGE CORPORATION

Current Principal Place of Business:

715 S. COUNTRY CLUB DRIVE
MESA, AR 85210

New Principal Place of Business:

Current Mailing Address:

715 S. COUNTRY CLUB DRIVE
MESA, AR 85210

New Mailing Address:

FEI Number: 86-0944240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so ().

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SHOEN, MARK V
Address: 715 S. COUNTRY CLUB DRIVE
City-St-Zip: MESA, AZ 85210

Title: AS () Delete
Name: BOUCHER, CLAUDE
Address: 2275 BARTON STREET E
City-St-Zip: HAMILTON, ON L8E2W8

Title: ST () Delete
Name: BROCKHAGEN, BRUCE
Address: 715 S. COUNTRY CLUB DRIVE
City-St-Zip: MESA, AZ 85210

Title: D () Delete
Name: CREEDON, TIMOTHY
Address: 715 S. COUNTRY CLUB DRIVE
City-St-Zip: MESA, AZ 85210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: AS (X) Change () Addition
Name: BOUCHER, CLAUDE
Address: 2275 BARTON STREET E
City-St-Zip: HAMILTON, ON L8E2W8

Title: ST (X) Change () Addition
Name: BROCKHAGEN, BRUCE G
Address: 715 S. COUNTRY CLUB DRIVE
City-St-Zip: MESA, AZ 85210

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 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 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: BRUCE G. BROCKHAGEN

ST

03/21/2002

Electronic Signature of Signing Officer or Director

_____ Date