## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 29, 2004 08:00 AM DOCUMENT # H54669 **Secretary of State** NAPLES MINI-STORAGE, INC. Principal Place of Business Mailing Address % BROOKS T. HUEY % BROOKS T. HUEY 3706 DOMESTIC AVE NAPLES, FL 33942 3706 DOMESTIC AVE NAPLES, FL 33942 CR2E034 (10/03) 04262004 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2539740 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent HUEY, BROOKS T. DO NOT WRITE 3706 DOMESTIC AVE NAPLES, FL 33942 IN THIS SPACE 3. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulard when rejustating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME HUEY, BROOKS T. 1901 PRINCESS CT STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34110 STD TITLE NAME HUEY, SANDRA STREET ADDRESS 1901 PRINCESS CT CITY-ST-ZIP NAPLES, FL 34110 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY -ST-ZIP

12. I hereby certify that the information supplied with this filling 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIG	N	A'	TL	JR	E:
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Brooks T. Huey, President

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April: 26, 2004 239-261-3001

**FILED** 

Dato

Daytime Phone #