


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # K45327

1. Entity Name
TYRONE MINI STORAGE COMPANY



Principal Place of Business Mailing Address
7750 38TH AVE.N. **7750 38TH AVE.N.**
ST PETERSBURG FL 33710 **ST PETERSBURG FL 33710**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State City & State

4. FEI Number Applied For
59-2925829 Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

MALLER, KAREN E
BARNETT TOWER
1 PROGRESS PLAZA SUITE 1210
ST. PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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 _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete
NAME	DALRYMPLE, GERALD F.
STREET ADDRESS	7750 - 38TH AVENUE NORTH
CITY-ST-ZIP	ST. PETERSBURG FL 33710
TITLE	VST <input type="checkbox"/> Delete
NAME	DALRYMPLE, NINA M.
STREET ADDRESS	7750 - 38TH AVENUE NORTH
CITY-ST-ZIP	ST. PETERSBURG FL
TITLE	D <input type="checkbox"/> Delete
NAME	DALRYMPLE, NINA M.
STREET ADDRESS	7750 - 38TH AVENUE NORTH
CITY-ST-ZIP	ST. PETERSBURG FL 33710
TITLE	COVP <input type="checkbox"/> Delete
NAME	KINSLER, CARA L
STREET ADDRESS	7750 38TH AVE. N.
CITY-ST-ZIP	ST. PETERSBURG FL
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	100000383561
CITY-ST-ZIP	04/17/08-80008-021 150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119 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 Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: *Cara L Kessler* **CARA L. KESSLER** *3/30/08*
 VICE PRESIDENT