


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000001760
 1. Entity Name
A EZEE SELF STORAGE LLC #100



Principal Place of Business 4237 RIGELS WAY COVE JENSEN BEACH, FL 34957	Mailing Address 4237 RIGELS WAY COVE JENSEN BEACH, FL 34957
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DO NOT WRITE IN THIS SPACE



01052005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1089696	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent
**LUNDSTROM, DANIEL J
 4237 RIGELS WAY COVE
 JENSEN BEACH, FL 34957**

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LUNDSTROM, DANIEL J 4237 RIGENS COVE WAY JENSEN BEACH, FL 34957
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 03/02/05-80045-007 50.00

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Daniel J Lundstrom*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date _____ Daytime Phone # _____