2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000005898

1. Entity Name

AFFORDABLE MINI-STORAGE, LLC



FILED Feb 26, 2007 08:00 A Secretary of State

Principal Place of Business

E DADIONAL

2999 GULF BREEZE PARKWAY GULF BREEZE, FL 32563 Mailing Address

1300 MALDONADO DRIVE PENSACOLA BEACH, FL 32561



01212007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3719311

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

TROUT, CASEY 1300 MALDONADO DRIVE PENSACOLA BEACH, FL 32561

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of cha- tions of registered agent.	inging its registered drice or registered agent, or or	All, ill tile State of Fiolica. Fall (alliana) Will, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and tritle if applicable	(NOTE. Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 tue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	TROUT, JENNIFER	·		
STREET ADDRESS	1300 MALDONADO DRIVE			
CITY-ST-ZIP	PENSACOLA BEACH, FL 32561			
TITLE	MGRM		U00000649306	
NAME	TROUT, CASEY		03/07/07-80043-018 55.00	
STREET ADDRESS	1300 MALDONADO DRIVE		מטינה פוס נדטמט וטיומינט	
CITY-ST-ZIP	PENSACOLA BEACH, FL 32561			
TITLE				
NAME				
STREET ADDRESS	1	1 00	NOT WRITE	
CITY-ST-ZIP		, 50	NOI WKIIE	
TITLE	·	in in	THIS SPACE	
NAME]	. 114	IIIIO OFACE	
STREET ADDRESS		j.		
CITY-ST-ZIP		1		
TITLE				

-11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:		1	174	2-20-	2007
	PROPTED	NAME	OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Daytme Phone #