


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000020710 1. Entity Name STORAGE MANAGEMENT, LLC	
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Principal Place of Business 9220 BONITA BEACH RD STE 101 BONITA SPRINGS, FL 34135	Mailing Address 9220 BONITA BEACH RD STE 101 BONITA SPRINGS, FL 34135
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DO NOT WRITE IN THIS SPACE



03162005No Chg-LLC CR2E083 (10/03)

4. FEI Number 04-3594719	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

**BORDNER, DONALD
9220 BONITA BEACH RD
STE 101
BONITA SPRINGS, FL 34135**

**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 BORDNER, DONALD 9220 BONITA BEACH RD, STE 101 BONITA SPRINGS, FL 34135
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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: *Don B. Bordner* 4/11/05 239-498-2100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #