

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90052 042 ****50.00

DOCUMENT # L01000020710

1. Entity Name

STORAGE MANAGEMENT, LLC



Principal Place of Business

**4836 BONITA BEACH ROAD #6
BONITA SPRINGS FL 34134**

Mailing Address

**4836 BONITA BEACH ROAD #6
BONITA SPRINGS FL 34134**

20007409



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

9220 Bonita Beach Rd

Suite, Apt. #, etc.

Suite 101

3. Mailing Address

9220 Bonita Beach Rd

Suite, Apt. #, etc.

Suite 101

City & State

Bonita Springs, FL

City & State

Bonita Springs, FL

Zip

34135-4205

Country

USA

Zip

34135-4205

Country

USA

4. FEI Number

04-3594719

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BORDNER, DONALD

**4836 BONITA BEACH ROAD #6
BONITA SPRINGS FL 34134**

7. Name and Address of New Registered Agent

Name

Bordner, Donald

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

9220 Bonita Beach Rd

Suite 101

City

Bonita Springs

FL

Zip Code

34135-4205

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **BORDNER, DONALD**
STREET ADDRESS **4836 BONITA BEACH ROAD #6**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGRM** ☒ Change ☐ Addition
NAME **Bordner, Donald**
STREET ADDRESS **9220 Bonita Beach Rd, Suite 101**
CITY-ST-ZIP **Bonita Springs, FL 34135-4205**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)