


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90072 046 ****50.00

DOCUMENT # L02000000012 1. Entity Name ARCHER MINI STORAGE II, L.L.C.					
Principal Place of Business 402 WEST HIGHWAY 24 ARCHER, FL 32618			Mailing Address PO BOX 89 ARCHER, FL 32618		
2. Principal Place of Business 16881 SW Archer Rd Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Archer FL		City & State		4. FEI Number 04-3698371	
Zip 32618		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SMITH, RAY D 402 WEST HIGHWAY 24 / 16881 SW Archer Rd ARCHER, FL 32618			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, RAY D 402 WEST HIGHWAY 24 / 16881 SW Archer Rd ARCHER, FL 32618 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <u>Ray D Smith</u> MGR <u>1-23-06</u> <u>352 495 7221</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					