


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 23, 2006 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT #</b> L03000006734                  |  |
| <b>1. Entity Name</b><br>CORTEZ STORAGE II, LLC |   |

|   |   |
|---|---|
| <b>Principal Place of Business</b><br>8915 WEST CORTEZ ROAD<br>BRADENTON, FL 34210-2208 | <b>Mailing Address</b><br>8915 WEST CORTEZ ROAD<br>BRADENTON, FL 34210-2208 |
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01192006 No Chg-LLC

CR2E083 (11/05)

|  |                                      |
|--|--------------------------------------|
| <b>4. FEI Number</b><br>31-1818892   | <b>Applied For</b><br>Not Applicable |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b> |                                      |

|   |
|---|
| <b>6. Name and Address of Current Registered Agent</b><br><br>CALLEJA, RONALD A<br>8915 W CORTEZ RD<br>BRADENTON, FL 34210-2208 |
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**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** \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

| 9. MANAGING MEMBERS/MANAGERS   |  |
|--|--|
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> | MGRM<br>CORTEZ STORAGE, LLC<br>8915 W CORTEZ ROAD<br>BRADENTON, FL 342102208 |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |  |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |  |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |  |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |  |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b> |  |

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04/08/06-80006-022 50.00

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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:** Ronald A. Calleja **MGRM RONALD A. CALLEJA** 7/10/06 (941) 795-5553

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #