2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000861

Entity Name: STORAGE EAST, LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

700 MILITARY CUTOFF ROAD SUITE 310 WILMINGTON, NC 28405

Current Mailing Address: New Mailing Address:

700 MILITARY CUTOFF ROAD SUITE 310 WILMINGTON, NC 28405

MGRM

Name:

FEI Number: 20-0738036 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOODS, WALTER G SABIN, CHARLES H 310 SW ÓCEAN BLVD. 3500 3500 SW CORPORATE PKWY STUART, FL 34994 PALM CITY, FL 34994

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.

SIGNATURE: CHARLES H SABIN 04/15/2009

> Electronic Signature of Registered Agent Date

> > Name:

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

MARTIN, JAMES W Address: 700 MILITARY CUTOFF ROAD SUITE 310 Address: City-St-Zip: WILMINGTON, NC 28405 City-St-Zip:

Title: () Delete Title: () Change () Addition Name: EJUPS, ALDIS Name: Address: 3500 SW CORPORATE PKWY Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition SABIN, CHARLES H Name: Name: 3500 SW CORPORATE PKWY Address: Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DEBORAH JONES 04/15/2009