

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Feb 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000021925

1. Entity Name
STORAWAY SELF STORAGE OF ORLANDO MANAGER,
LLC



Principal Place of Business
12280 E. COLONIAL DRIVE
ORLANDO, FL 32826

Mailing Address
1223 N ROCK RD
BUILDING E STE 200
WICHITA, KS 67206



02192008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3293145

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
CLARK, STEPHEN L
1223 N. ROCK ROAD, SUITE 200
WICHITA, KS 67206

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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U00000843117
03/11/08-80057-012 138.75

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IN THIS SPACE**

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:

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

Date

Daytime Phone #

2/21/2008