

FILED
Jun 01, 2007 8:00 am
Secretary of State

05-04-2007 90307 018 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000031064		
1. Entity Name BUDGET SELF STORAGE, LLC		
Principal Place of Business 4828 DAVIS HWY. PENSACOLA, FL 32503		Mailing Address 4828 DAVIS HWY. PENSACOLA, FL 32503
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent GERSTENBERG, BRYAN 4828 DAVIS HWY. PENSACOLA, FL 32503		DO NOT WRITE IN THIS SPACE
5. 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 <u><i>[Signature]</i></u> Signature, typed or printed name of registered agent and title if applicable.		DATE <u>4/24/07</u> DATE
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GERSTENBERG, BRYAN 4828 N DAVIS HWY PENSACOLA, FL 32503	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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><i>[Signature]</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date <u>5-30-07</u> Date
		Daytime Phone # <u>850 477 8668</u> Daytime Phone #