

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000060258

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** BURLINGTON SELF STORAGE OF PORT ST. LUCIE, LLC

**Current Principal Place of Business:**

135 CAMBRIDGE STREET  
BURLINGTON, MA 01803

**New Principal Place of Business:**

**Current Mailing Address:**

135 CAMBRIDGE STREET  
BURLINGTON, MA 01803

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

SADER, ROBERT L ESQ.  
6300 NE 1ST AVENUE  
SUITE 202  
FT. LAUDERDALE, FL 33334 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BURLINGTON SELF STORAGE OF CAPE COD LLC  
Address: 135 CAMBRIDGE STREET  
City-St-Zip: BURLINGTON, MA 01803

I hereby 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: CHRISTOPHER M CAPOZZOLI                      MGR                      01/04/2012

\_\_\_\_\_ Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date