

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

03-24-2006 90217 030 ****50.00

DOCUMENT # L05000084875					
1. Entity Name SECURE STORAGE AT 84, L.C.					
Principal Place of Business 1500 CORDOVA ROAD, SUITE 310 FORT LAUDERDALE, FL 33316			Mailing Address 1500 CORDOVA ROAD, SUITE 310 FORT LAUDERDALE, FL 33316		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3814154	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent STROSS, HOWARD STROSS LAW FIRM, P.A. 1801 PEPPER TREE DRIVE OLDSMAR, FL 34677			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 requesting) Signature, typed or printed name of registered agent and title if applicable. DATE					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KELLA RANDALL 1500 CORDOVA ROAD, SUITE 310 FORT LAUDERDALE, FL 33316	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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 BOARDING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE)			3-20-06 954-523-4008 Date Daytime Phone #		
RANDALL KELLA					