2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 03, 2006
Secretary of State

DOCUMENT# L05000094448

Entity Name: X-S STORAGE, LLC

Current Principal Place of Business:

3050 NE 47 COURT #604
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

3050 NE 47 COURT #604
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 20-3528969 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GOCKERELL, DARRICK
3050 NE 47 COURT #604
FORT LAUDERDALE, FL 33308 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: MGR ( ) Delete
Name: GOCKERELL, DARRICK
Address: 792 N.E. 45TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

Title: MGR ( ) Delete
Name: GOCKERELL, DINA
Address: 792 N.E. 45TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GOCKERELL, DARRICK
Address: 3050 NE 47 COURT #604
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR (X) Change ( ) Addition
Name: GOCKERELL, DINA
Address: 3050 NE 47 COURT #604
City-St-Zip: FORT LAUDERDALE, FL 33308

I hereby certify that the information supplied with this filing does not qualify for the 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: DARRICK GOCKERELL MGR 07/03/2006

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