


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90315 033 \*\*\*138.75

<b>DOCUMENT # L05000098911</b>	
1. Entity Name <b>BELCHER STORAGE, L.L.C.</b>	

Principal Place of Business <b>12950 RACETRACK #201 TAMPA, FL 33626</b>	Mailing Address <b>1245 COURT STREET 102 CLEARWATER, FL 33756</b>
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address <b>12950 RACETRACK RD</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc. <b>201</b>
City & State	City & State <b>TAMPA FL</b>
Zip	Zip <b>33626</b>
Country	Country <b>USA</b>



03242008 Chg-LLC CR2E083 (12/06)

6. Name and Address of Current Registered Agent <b>WALSH, PATRICK 12950 RACETRACK #201 TAMPA, FL 33626</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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 \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>	<b>Make check payable to Florida Department of State</b>
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR WALSH, PATRICK J 12950 RACETRACK #201 TAMPA, FL 33626</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:** *Patrick Walsh* **3/26/08** **727-422-1011**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #