

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016274

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: DUNDEE SELF STORAGE, LLC

## Current Principal Place of Business:

900 TWELVE OAKS DRIVE  
WINTER HAVEN, FL 33880 US

## New Principal Place of Business:

29500 HWY 27  
DUNDEE, FL 33838 US

## Current Mailing Address:

25344 WESLEY CHAPEL BLVD  
LUTZ, FL 33559 US

## New Mailing Address:

29500 HWY 27  
DUNDEE, FL 33838 US

FEI Number: 20-5289220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PUTNAM, ABEL A  
500 S. FLORIDA AVE.  
SUITE 300  
LAKELAND, FL 33801 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: COSCIA, STEVEN P  
Address: 900 TWELVE OAKS DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: MGR ( ) Delete  
Name: CLARK, TIMOTHY C  
Address: 900 OLEANDER DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: COSCIA, BECKY  
Address: 900 TWELVE OAKS DRIVE  
City-St-Zip: WINTER HAVEN, FL 33880 US

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN P. COSCIA

MGR

01/21/2009

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