

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038618

FILED  
Jan 11, 2008  
Secretary of State

Entity Name: COLWELL MINI-STORAGE, LLC

**Current Principal Place of Business:**

173 SE NIGHTSCAPE GLN  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 67246  
ST. PETE BEACH, FL 33736

**New Mailing Address:**

FEI Number: 20-4719558

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'CONNOR, PATRICK M ESQ.  
O'CONNOR & ASSOCIATES  
1250 S. BELCHER ROAD, STE. 160  
LARGO, FL 33771 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: COLWELL, BARBARA J  
Address: 7951 BOCA CIEGA DR  
City-St-Zip: ST PETE BEACH, FL 33736

Title: MGR ( ) Delete  
Name: CARL, COLWELL  
Address: 7951 BOCA CIEGA DR  
City-St-Zip: ST PETE BEACH, FL 33736

**ADDITIONS/CHANGES:**

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

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

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: BARBARA J COLWELL

MGR

01/11/2008

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