

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000077195

FILED
Aug 30, 2007
Secretary of State

Entity Name: FAIRGROUNDS U-STORE-IT, L.L.C.

Current Principal Place of Business:

411 NORTH NEW RIVER DRIVE EAST, UNIT 403
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

411 N. NEW RIVER DR. E.
SUITE 403
FORT LAUDERDALE, FL 33301

Current Mailing Address:

411 NORTH NEW RIVER DRIVE EAST, UNIT 403
FORT LAUDERDALE, FL 33301

New Mailing Address:

411 N NEW RIVER DR. E.
SUITW 403
FORT LAUDERDALE, FL 33301

FEI Number: 68-0639873 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:

FEINBERG, JEFFREY ESQ
FEINBERG & MAIDENBAUM
4000 HOLLYWOOD BOULEVARD, SUITE 350-N
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

FALIN, JAMES R
411 N. NEW RIVER DR. E.
SUITE 403
FORT LAUDERDALE, FL 33301 US

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: JAMES R FALIN

08/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: FALIN, JAMES R
Address: 411 N NEW RIVER DR E #403
City-St-Zip: FORT LAUDERDALE, FL 33301

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: JAMES R. FALIN

MGRM

08/30/2007

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