

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009176

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: A SOUTHERN COMFORT STORAGE, LLC.

**Current Principal Place of Business:**

6202 W. LINEBAUGH AVE.  
TAMPA, FL 33625

**New Principal Place of Business:**

6202 W. LINEBAUGH AVENUE  
TAMPA, FL 33625

**Current Mailing Address:**

6202 W. LINEBAUGH AVE.  
TAMPA, FL 33625

**New Mailing Address:**

6202 W. LINEBAUGH AVENUE  
TAMPA, FL 33625

FEI Number: 77-0711076

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAYMAN, STEPHEN D ESQ.  
6605 GUNN HWY.  
TAMPA, FL 33625 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: MGRM ( ) Delete  
Name: TESSNER, WILLIAM M  
Address: 6202 W. LINEBAUGH AVE.  
City-St-Zip: TAMPA, FL 33625

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: TESSNER, WILLIAM M  
Address: 6202 W. LINEBAUGH AVENUE  
City-St-Zip: TAMPA, FL 33625

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: WILLIAM M. TESSNER

PRES

03/09/2009

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