

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000071258

**FILED**  
**May 07, 2009**  
**Secretary of State**

**Entity Name:** EUSTIS STORAGE MANAGEMENT, LLC

**Current Principal Place of Business:**

7501 WILES ROAD, SUITE 205  
CORAL SPRINGS, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

7501 WILES ROAD, SUITE 205  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

**FEI Number:** 26-3323184      **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:**

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

FORMAN, ROBERT S  
2101 WEST COMMERCIAL BLVD., SUITE 2800  
FORT LAUDERDALE, FL 33309 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** EUSTIS MANAGER CORP.  
**Address:** 7501 WILES ROAD, SUITE 205  
**City-St-Zip:** CORAL SPRINGS, FL 33067

**ADDITIONS/CHANGES:**

**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: SEYMOUR RAVINSKY

MGR

05/07/2009

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