

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAR 27 AM 7:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L95000000580

1. Entity Name
MABRY STORAGE, L.C.

Principal Place of Business
2106 BISPHAM RD.
SUITE B
SARASOTA FL 34231

Mailing Address
2106 BISPHAM RD.
SUITE B
SARASOTA FL 34231-5518

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0583497

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PATTERSON, JOHN
46 N. WASHINGTON BLVD.
SUITE 1
SARASOTA FL 34236

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Delete
NAME 1116304 ONTARIO INC., ATTN. TERRY YATES
STREET ADDRESS 253 ROBINA RD.
CITY-ST-ZIP ANCASTER, ONTARIO L9G -2L6

TITLE ☐ Change ☐ Addition
NAME 600003208246--?
STREET ADDRESS -04/13/00--01090--014
CITY-ST-ZIP *****50.00 *****50.00

TITLE MGRM ☐ Delete
NAME SACKVILLE HOLDINGS, INC., ARTHUR LABATT
STREET ADDRESS ONE FIRST CANADIAN PL., BOX 487
CITY-ST-ZIP TORONTO, ONTARIO M5X -1E5

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME 100070 ONTARIO LIMITED, ATTN. PAUL CURLEY
STREET ADDRESS %95 ST. CLAIR AVE. WEST, #1605
CITY-ST-ZIP TORONTO, ONTARIO M4V -1N6

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME SANVIN, INC., ATTN. DONALD GREER
STREET ADDRESS %3375 14TH AVE., UNIT 1
CITY-ST-ZIP MARKHAM, ONTARIO L3R -0H2

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME JOHNSON, JOHN E
STREET ADDRESS 627 BUCHANAN ST.
CITY-ST-ZIP DAVIS CA 95616

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME PARBIRDIE HOLDINGS, INC., ATTN PETER DEEKS
STREET ADDRESS 4 HIGHLAND CRESCENT
CITY-ST-ZIP TORONTO, ONTARIO M4W -2S7

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: ✓

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

3/4/2000

1941-365-4617

Daytime Phone #

CR2E083 (9/99)