

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L96000000755

1. Entity Name
SOCRUM SELF STORAGE, L.C.



Principal Place of Business
**9010 HWY 98 NORTH
LAKELAND, FL 33809**

Mailing Address
**2331 D.R. BRYANT ROAD
LAKELAND, FL 33809**

DO NOT WRITE IN THIS SPACE

04292008 No Chg: LLC CR2E083 (12/07)

4. FEI Number
59-3385821

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**O'STEEN, DARRELL
2331 D.R. BRYANT ROAD
LAKELAND, FL 33809**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW!! FEE IS \$138.75
After May 1, 2008 Fee will be \$535.75**

000000938571
05/27/08-80016-014 138.75

1. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CONNELL PHILLIP C 320 NORTH COLLEGE STREET LAKELAND, GA 31635
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR O'STEEN, DARRYL 2331 D.R. BRYANT ROAD LAKELAND, FL 33809
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF CURRENT MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #