2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L98000002675

1. Entity Name
SOUTH VENICE STORAGE, L.L.C.

Principal Place of Business	Mailing Address
20 CIRCLEWOOD DRIVE VENICE, FL 34293	1682 E. GUDE DRIVE, SUITE 201 ROCKVILLE, MD 20850

02102006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-2129647
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LOVETT, JOHN C ESQ.
106 EAST COLLEGE AVENUE, SUITE 1200
TALLAHASSEE, FL 32301

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable *(NOTE: Registered Agent signature required when reinstating)*

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SELF STORAGE, LLC
STREET ADDRESS	1682 E. GUDE DRIVE, SUITE 201
CITY-ST-ZIP	ROCKVILLE, MD 20850
TITLE	MGRM
NAME	MORAN, RICHARD P JR
STREET ADDRESS	1682 E. GUDE DRIVE, SUITE 201
CITY-ST-ZIP	ROCKVILLE, MD 20850
TITLE	MGRM
NAME	NUGENT, JAMES R JR
STREET ADDRESS	1682 E. GUDE DRIVE, SUITE 201
CITY-ST-ZIP	ROCKVILLE, MD 20850
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 2/10/06 301-762-1030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #