

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001457

FILED  
Mar 29, 2006  
Secretary of State

**Entity Name:** EVEREST STORAGE MANAGER II, LLC

**Current Principal Place of Business:**

199 S. LOS ROBLES AVE.  
SUITE 200  
PASADENA, CA 91101

**New Principal Place of Business:**

**Current Mailing Address:**

199 S. LOS ROBLES AVE.  
SUITE 200  
PASADENA, CA 91101

**New Mailing Address:**

**FEI Number:** 95-4763728

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEXISNEXIS DOCUMENT SOLUTIONS INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: KOHORST, W.ROBERT  
Address: 199 S. LOS ROBLES AVE., #200  
City-St-Zip: PASADENA, CA 91101

Title: MGRM (X) Delete  
Name: BECKMANN, CARL D  
Address: 199 S. LOS ROBLES AVE., #200  
City-St-Zip: PASADENA, CA 91101

Title: MGR (X) Delete  
Name: EVEREST STORAGE HOLD, INGS, LLC  
Address: 199 S. LOS ROBLES AVE., #200  
City-St-Zip: PASADENA, CA 91101

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: EVEREST STORAGE HOLD, INGS, LLC  
Address: 199 S. LOS ROBLES AVE., #200  
City-St-Zip: PASADENA, CA 91101

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: W. ROBERT KOHORST

PRES

03/29/2006

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