

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90060 004 \*\*\*138.75

**DOCUMENT # M03000004025**

1. Entity Name  
**LONGWOOD STOR-IT, LLC**



Principal Place of Business  
**% WOODBURN AND WEDGE  
6100 NEIL ROAD, SUITE 500  
RENO, NV 89511-1149**

Mailing Address  
**% WOODBURN AND WEDGE  
6100 NEIL ROAD, SUITE 500  
RENO, NV 89511-1149**

**DO NOT WRITE IN THIS SPACE**



04232008No Cng-LLC

CR2E063 (12/07)

4. FEI Number  
**20-0392922**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**WEBB, RICHARD S IV ESQ  
2033 MAIN STREET SUITE 600  
SARASOTA, FL 34237**

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
WILLIAMS, DALE A  
% WOODBURN AND WEDGE, 6100 NEIL ROAD, #500  
RENO, NV 895111149**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
BRENNING, LORI  
% WOODBURN AND WEDGE, 6100 NEIL ROAD, #500  
RENO, NV 895111149**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
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:** *Lori Brenning* *Lori Brenning*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*4/24/08*  
Date

*916-989-2800*  
Daytime Phone #