


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 10, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # M04000003089**  
 1. Entity Name  
**EXTRA SPACE PROPERTIES SIXTEEN LLC**



Principal Place of Business 2795 EAST COTTONWOOD PARKWAY #400 SALT LAKE CITY, UT 84121	Mailing Address 2795 EAST COTTONWOOD PARKWAY #400 SALT LAKE CITY, UT 84121
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**DO NOT WRITE IN THIS SPACE**



01052005No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-1357899	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**  
 C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

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

**Filing Fee is \$50.00  
 Due by May 1, 2005**

U00000175609  
 01/10/05-80058-008 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHRISTENSEN, KENT W 2795 EAST COTTONWOOD PARKWAY SALT LAKE CITY, UT 84121
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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:** Kent W. Christensen **KENT W. CHRISTENSEN**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE **MANAGER** **1-5-05** **801-562-5556**  
Date Daytime Phone #