2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000000994

1. Entity Name SAFE MINI STORAGE OF NICEVILLE, L.L.C.



Principal Place of Business 8075 MADISON BLVD., #112

MADISON, AL 35758

Mailing Address

8075 MADISON BLVD., #112 MADISON, AL 35758

30005342



FILED

Apr 23, 2007 8:00 am Secretary of State

03-30-2007 90038 001 ****50.00

DO NOT WRITE IN THIS SPACE

01102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For Not Applicable
5. Certificate of Status Desired
5.00 Additional

6. Name and Address of Current Registered Agent

BRELAND, LOUIS W 1809 WEAKFISH WAY PANAMA CITY, FL 32411

SIGNATURE.

SIGNATURE:

SIGNATURE AND TO

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

	Signature, typed or printed neme of registered agent and little if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
F	lling Fee is \$50.00 ue by May 1, 2007		,
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRELAND ENTERPRISES DR.L.P. 222 DELAWARE AVENUE, 10TH FLOOR WILMINGTON, DE 19899		
HAME SIREET ADDRESS CITY-ST-ZP			
TITLE HAME STREET ADDRESS CITY-ST-ZIP		DO NOT	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZP		IN THIS S	SPACE
TITLE NAME STREET ADDRESS GITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	<i>;</i> .
TITLE NAME STREET ADDRESS CITY-ST-ZIP	21		
11. I hereby certify that the information supplied with this filling boas not quality 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 flability company or the ryfective or providing the execute this report as required by Chapter 608, Florida Statutes.			

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