

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005463

FILED
Mar 19, 2009
Secretary of State

Entity Name: FIVE SAC 905, LLC

Current Principal Place of Business:

1250 E. MISSOURI AVE
PHOENIX, AZ 85014

New Principal Place of Business:

Current Mailing Address:

2721 N. CENTRAL AVE
PHOENIX, AZ 85014

New Mailing Address:

FEI Number: 20-3485120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR () Delete
Name: SHOEN, MARK V
Address: 1250 E. MISSOURI AVE
City-St-Zip: PHOENIX, AZ 85014

Title: MGR () Delete
Name: PEOPLES, BETH L
Address: 103 FOULK RD., SUITE 200
City-St-Zip: WILMINGTON, DE 19803

Title: MGRM () Delete
Name: FIVE SAC SELF-STORAG, E CORPORATION
Address: 1250 E. MISSOURI AVE
City-St-Zip: PHOENIX, AZ 85014

ADDITIONS/CHANGES:

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

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 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: BRUCE G. BROCKHAGEN

MGRM

03/19/2009

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