

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000005743

1. Entity Name
DOWNTOWN STORAGE UNIT 1, INC.



Principal Place of Business
**110 EAST REYNOLDS AVE.
SUITE 201
PLANT CITY, FL 33563**

Mailing Address
**P.O. BOX 1118
PLANT CITY, FL 33564-1118**



01212005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3599766** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VERNER, EDWARD M
110 EAST REYNOLDS STREET, SUITE 700
PLANT CITY, FL 33563**

**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

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VERNER, EDWARD 110 E. REYNOLDS ST. PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SURRETT, JR., LEWIS P 110 E. REYNOLDS ST. PLANT CITY, FL 33566
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO GIBBS, DOUG 110 E. REYNOLDS ST. PLANT CITY, FL 33566
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02/26/05-80024-015 61.25

**DO NOT WRITE
IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ed M. Verner (Pres)

2/26/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #