

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90241 017 \*\*\*150.00

DOCUMENT # P00000051237

1. Entity Name  
AMPLE STORAGE, INC.



Principal Place of Business  
3302 ALTERNATE 19 N.  
PALM HARBOR, FL 34683

Mailing Address  
3302 ALTERNATE 19 N.  
PALM HARBOR, FL 34683

2. Principal Place of Business

4705 Alternate 19

Suite, Apt. #, etc.

Unit B

City & State  
Palm Harbor, FL

Zip  
34683

Country  
USA

3. Mailing Address

4705 Alternate 19

Suite, Apt. #, etc.

Unit B

City & State  
Palm Harbor, FL

Zip  
34683

Country  
USA

03212006 Chg-P CR2E034 (11/05)

4. FEI Number  
59-3650243

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

WOLLINKA, DAVID J  
2312 US HWY. 19  
HOLIDAY, FL 34690

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME WIKLE, PAUL J  
STREET ADDRESS 3302 ALTERNATE 19 N.  
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE D ☐ Delete  
NAME BOLTON, DAVID  
STREET ADDRESS 3302 ALTERNATE 19 N.  
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE D ☐ Delete  
NAME LAWRENCE, JOSEPH P  
STREET ADDRESS 3302 ALTERNATE 19 N.  
CITY-ST-ZIP PALM HARBOR, FL 34683

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME 4705 Alternate 19, Unit B  
STREET ADDRESS Palm Harbor, FL 34683  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME 4705 Alternate 19, Unit B  
STREET ADDRESS Palm Harbor, FL 34683  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME 4705 Alternate 19, Unit B  
STREET ADDRESS Palm Harbor, FL 34683  
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TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/06

Date

727-787-2727

Daytime Phone #