

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000078486

Entity Name: WRENN STORAGE INC.

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

300 ATLANTIC DR  
STE 10  
KEY LARGO, FL 33037

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3006  
KEY LARGO, FL 33037

**New Mailing Address:**

PO BOX 373006  
KEY LARGO, FL 33037

FEI Number: 65-1037267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STANLEY, MICHAEL  
300 ATLANTIC DR  
KEY LARGO, FL 33037 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

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: SANTE, CHRIS  
Address: 300 ATLANTIC DR  
City-St-Zip: KEY LARGO, FL 33037

Title: VPD  
Name: SANTE, PAMELA  
Address: 300 ATLANTIC DR  
City-St-Zip: KEY LARGO, FL 33037

Title: TD  
Name: STANLEY, MICHAEL  
Address: 300 ATLANTIC DR  
City-St-Zip: KEY LARGO, FL 33037

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL STANLEY

TD

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date