

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90120 001 ***150.00

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DOCUMENT # P01000059984

1. Entity Name
KROME SELF STORAGE, INC.



Principal Place of Business
**1977 DUNDEO DRIVE
WINTER PARK FL 32792**

Mailing Address
**P O BOX 4961
ORLANDO FL 32802-4961**

41043000



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

CHECK HERE IF MAKING CHANGES

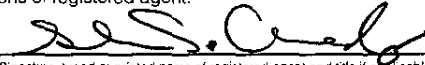
4. FEI Number **59-3725586** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
**B & C CORPORATE SERVICES
390 N ORANGE AVE STE 1100
ORLANDO FL 32801**

7. Name and Address of New Registered Agent
Name **A & S Development, Inc.**
Street Address (P.O. Box Number is Not Acceptable) **1977 Dundee Drive**
City **Winter Park** FL Zip Code **32792**

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  **Shane L. Acevedo President** **4/28/03**
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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete ACEVEDO, SHANE L 1977 DUNDEE DRIVE WINTER PARK FL 32792	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition P, S, T
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete SHEPHERD, THOMAS H 1977 DUNDEE DRIVE WINTER PARK FL 32792	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP
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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 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:  **Shane L. Acevedo President** **4/28/03** (407) 657-1113
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/02)