

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90104 016 ***150.00

DOCUMENT # P01000091492

1. Entity Name
SENTRY STORAGE, INC.



Principal Place of Business
**8660 COLLEGE PARKWAY, SUITE 160
FORT MYERS FL 33919**

Mailing Address
**8660 COLLEGE PARKWAY, SUITE 160
FORT MYERS FL 33919**



2. Principal Place of Business
6150 Diamond Centre Court

3. Mailing Address
6150 Diamond Centre Court

Suite, Apt. #, etc.
Bldg. 1300

Suite, Apt. #, etc.
Bldg. 1300

City & State
Fort Myers, FL

City & State
Fort Myers, FL

4. FEI Number **APPLIED FOR**
65-0828488

Applied For
Not Applicable

Zip
33912

Country
Lee

Zip
33912

Country
Lee

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

6. Name and Address of Current Registered Agent

**BOLANOS TRUXTON, PA
12800 UNIVERSITY DRIVE
SUITE 340
FORT MYERS FL 33907**

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, 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

TITLE **PD** ☐ Delete
NAME **FERNANDEZ, RICHARD**
STREET ADDRESS **20 CATALPA COURT**
CITY-ST-ZIP **FT MYERS FL 33919**

TITLE **V** ☐ Delete
NAME **THIBAUT, RANDY**
STREET ADDRESS **8660 COLLEGE PARKWAY, SUITE 160**
CITY-ST-ZIP **FORT MYERS FL 33919**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **6150 Diamond Centre Court, Bldg. 1300**
CITY-ST-ZIP **Fort Myers, FL 33912**

TITLE ☐ Change ☒ Addition
NAME **Janet Allison**
STREET ADDRESS **6150 Diamond Centre Court, Bldg. 1300**
CITY-ST-ZIP **Fort Myers, FL 33912**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janet Allison, V.P.

4/1/03

239-489-4066

Date

Daytime Phone #

CR2E034 (10/02)