2005 FOR PROFIT CORPORATION ANNUAL REPORT					FILED Apr 04, 2005 8:00 am Secretary of State			
DOCUMENT # P03000042874					Secretary of State 04-04-2005 90073 011 ***158.75			
	ORTH SELF-STORAGE, INC	2.			04-04-200	5 90073 011 15	18.75	
Principal Place of Business Mailing Address 751 PARK OF COMMERCE DR STE 128 751 PARK OF COMMER BOCA RATON, FL 33487 BOCA RATON, FL 3348								
2. Principal P 2/35 Suite, Apt.	ALE WORTH B	3. Mailing Address 8/35 LAKE Suite_Apt. #, etc.	Ubrth K	02042005		CR2E034 (10/03		
City & Stat	"NORTH FL	SUITE E	RTH FL	4. FEI Num	iber.		pplied For	
3346	1 Country SA	Zip 33467	Country		07370 te of Status Desire	\$9.75 4		
	6. Name and Address of Current F	Registered Agent		7. Name ar	nd Address of Ne	w Registered Agent		
COLMAN, NANCY B 150 E PALMETTO PK RD STE 750 BOCA RATON, FL 33432			Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
BOCANA	10N, 1 L 33432		City			FL Zip Co	de	
	a named entity submits this statement for	the purpose of changing its	s registered office or i	registered agent, or t	ooth, in the State o		, and accept	
SIGNATURE.	tions of registered agent.		- -					
	задпация, прес от ринаю паляе от гедистер адел а		TE: Registered Agent signatur			DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	9. Election Campa Trust Fund Con	· · -	\$5.00 May Be Added to Fees				
10. TITLE	OFFICERS AND I		11.	ADDITION	S/CHANGES TO	OFFICERS AND DIRECTO		
NAME STREET ADDRESS CITY-SI-ZIP	PECHTER, MARTIN 751 PARK OF COMMERCE DR S BOCA RATON, FL 33487	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Delete III PECHTER, JEFFREY Mu 751 PARK OF COMMERCE DR STE 128 ST BOCA RATON, FL 33487 Cr			8135 LA	IKE WI	12 ^{Change} DRTH RD-S <u>FZ 33467</u> 12 ^{Change}		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD BLOCK, STEPHEN 751 PARK OF COMMERCE DR S BOCA RATON, FL 33487	TITLE NAME STREET ADDRESS CITY-ST-ZIP	8:135 -L	A-KE-U	JORTH RD - FL 33467	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	UIRC LL	-URIA	<u>/ / /</u> Change	. Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		🗖 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			🔲 Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 1		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
of the co	certify that the information supplied with I on this report or supplemental report is rporation or the receiver or trustee empo , or on an attachment with an address	true and accurate and that wered to execute this repor	my signature shall ha t as required by Char	ve the same lecal off	ect as if made und	ter oath: that I am an office	ar or director	
•								
SIGNAT					29/05	561.357	-0121	

.