


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2004 8:00 am
Secretary of State

02-26-2004 90019 005 ***150.00

DOCUMENT # P03000119242			
1. Entity Name GREENVILLE MINI STORAGE & CAR WASH, INC.			
Principal Place of Business 4225 AMBER VALLEY DRIVE TALLAHASSEE, FL 32312		Mailing Address 4225 AMBER VALLEY DRIVE TALLAHASSEE, FL 32312	
2. Principal Place of Business <i>US Hwy 90 S US221</i> <small>Suite, Apt. #, etc.</small>		3. Mailing Address <i>PO Box 180263</i> <small>Suite, Apt. #, etc.</small>	
City & State <i>Greenville FL</i>		City & State <i>Tallahassee FL</i>	
Zip <i>32331</i>	Country <i>USA</i>	Zip <i>32318</i>	Country <i>USA</i>
4. FEI Number <i>20-0379891</i>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MANAUSA, DANIEL E 3520 THOMASVILLE ROAD, FOURTH FLOOR TALLAHASSEE, FL 32309		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		Zip Code	
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 <i>Daniel A Campbell</i>		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00.		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 CAMPBELL, DANIEL A 4225 AMBER VALLEY DRIVE TALLAHASSEE, FL 32312 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMPBELL, COLLETTE R 4225 AMBER VALLEY DRIVE TALLAHASSEE, FL 32312 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>Daniel A Campbell</i>		Date: <i>2/18/04</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR</small>		<small>Date</small>	