

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000050456 1. Entity Name WAYNE MINI STORAGE, INC.	
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FILED
 08 APR 24 AM 7:31
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786 US	Mailing Address 9350 CONROY WINDERMERE ROAD WINDEMERE, FL 34786 US
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03312008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2469765	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

CORPDIRECT AGENTS, INC.
 515 EAST PARK AVENUE
 TALLAHASSEE, FL 32301

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD PIERCY, TYLER V 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VOSS, JEFFERSON R 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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]* *Tyler Piercy* 4-14-08 407-909-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #