2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000072247

Title:

Name:

Address:

City-St-Zip:

FILED Jan 20, 2006 Secretary of State

Entity Nar	me: CENTRA	L FLORIDA MINI STORAGE	E, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
36841 WHISPERING WIND STREET GRAND ISLAND, FL 32735				2580 COUNT RD 44 WEST EUSTIS, FL 32726			
Current Mailing Address:				New Mailing Address:			
PO BOX 1678 EUSTIS, FL 327271678				2580 COUNTY RD 44 WEST EUSTIS, FL 32726			
FEI Number: 20-2877291		FEI Number Applied For ()	FEI Nun	FEI Number Not Applicable ()		Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
310 S. RHOMOUNT DO		57 US	e purpose o	f changing i	ts registere	ed office or registered agent, or both,	
	e of Florida.						
SIGNATURE: Electronic Signature of Registered Agent				Date			
Election Can	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	TEEMS, TROY	RING WIND STREET		Title: Name: Address: City-St-Zip:		(X) Change()Addition N, FRANK L NTY RD 44 WEST L 32726	
Title: Name: Address: City-St-Zip:	WAGNER, PEN 2580 COUNTY EUSTIS, FL 32	ROAD 44 WEST 7266927		Title: Name: Address: City-St-Zip:	HARRISON	OR SPRINGS LANE NBURG, VA 22801	
Title: Name: Address:	BAGWELL, KE 36841 WHISPE	RING WIND STREET		Title: Name: Address: City-St-Zip:		(X) Change () Addition NICOLE OR SPRINGS LANE URLING VA 22801	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: FRANK L TILLOTSON P 01/20/2006

() Delete

() Change (X) Addition

TILLOTSON, LORNA R

EUSTIS, FL 32726

2580 COUNTY RD 44 WEST