## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000138712

Address:

City-St-Zip:

1011 OMAR ROAD

WEST PALM BEACH, FL 33405

Entity Name: SELF-STORAGE DISPOSAL, INC.

FILED Feb 17, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1011 OMA WEST PA	R ROAD LM BEACH, F	L 33405			
Current Mailing Address:			New Mailing Address:		
1011 OMA WEST PA	R ROAD LM BEACH, F	L 33405			
FEI Number	: 51-0610175	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	R ROAD LM BEACH, F				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LALONDE, DE 16420 RUSTIC		Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	POLLOCK, CH 1011 OMAR R		Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	VP ( BALLENTINE,	) Delete JACK	Title: ( Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: JACK BALLENTINE VP 02/17/2009