## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P36663 DOCUMENT # 1. Corporation Name

(3)

PUBLIC STORAGE PROPERTIES XIX, INC.

							/   <b>       </b>		
Principal Place of Business Mailing Address					1 1009/00/100	ANTE BUILD BILLE O	JAROO TAHA OTOTA I	0(01) <b>8</b> 1811 814	NIS OLDIN BIOLIT SOOF
	ND BLVD. SUITE 300 CA 91203-1241		00 n Brand Blvd. Suite 300 Glendale Ca 91203-1241						
					3. Date Incorporate 12/12/199			te of Last R 05/01/19	
	ace of Business	2a. Mailing Address			4. FEI Number			T	Applied For
	3. Western Ave	26 PO BOX 2	5025		95-4325	981		🎞	Not Applicable
Suite, Apt. #		Suite, Apt. #, etc. 27 Dep+ PT		· · · · · · · · · · · · · · · · · · ·	5. Certificate of Sta				5 Additional Required
City 8 State 23 Glence	dale CA	City & State 28 Glendale	CA		6. Election Campaig Trust Fund Contr		<b>C</b> 3		0 May Be
Zip Zip	Country	Zip	Country	•	B. This corporation	has liability for	rintangible t	ax under s	199.032,
24 91201	9. Name and Address of Current	29 91201-5025	30/LOS H1	ngeles	Florida Statutes		s []No		
	9. Name and Address of Current	Hegistered Agent	81		10. Name and Add	ress of New	Registered	Agent	
CT COI	RPORATION SYSTEM			lame					
	. PINE ISLAND ROAD		82 5	Street Addres	ss (P.O. Box Number is	ble)	)		
	ATION FL 33324		83	3000	1017	997	<u>.1</u> .3		
, (2)(1)	110111 6 55524		63			/9601	U46U	116	
				City	***200		FL		p Code
or registere familiar with	o the provisions of Sections 607,0502 a od agent, or both, in the State of Florida h, and accept the obligations of, Sectio	ind 607.1508, Florida Statute i. Such change was aurhorize n 607.0505, Florida Statutes.	s, the above-nan ed by the corpora	ned corporat lion's board	ion submits this staten of directors. I hereby a	nent for the pu accept the app	irpose of ch pointment as	anging its r s registered	egistered office Lagent. Lam
SIGNATURE									
	Signature, typed or printed name of registered agent an		t: Registered Agent sig	nature required w			DATE		
12.	OFFICERS AND		13.	<del></del>	ADDITIONS/CHA	NGES TO OF	FICERS AND	O DIRECTO	RS IN 12
TITLE	HUGHES, B. WAYNE	DELETE	1. 1 TITLE	1			ŀ	Change .	☐ Addition
NAME			1.2 NAME						
STREET ADDRESS	600 N BRAND BLVD #300 GLENDALE CA		1.3 STREET ADI		1 3. West				
CITY-ST-ZIP TITLE	D D D	F-1 DC) CTC	1.4 CITY - ST - Z	P   61e	indale (	A	91201	· • · · · · · · · · · · · · · · · · · ·	
	Lenkin, Harvey	☐ DELETE	2 1 TITLE					Change 🔀	Addition
NAME Parent Laborator	600 N BRAND BLVD #300		2.2 NAME			_			
STREET ADDRESS	GLENDALE CA		2 3 STREET ADE				ve		
CITY-ST-ZIP TITLE	VST	C) OF LEE	24 CITY - ST - Z	" Gl	endale c	A 9	1001		
NAMI:	GERICH, OBREN B.	☐ DELETE	3 1 TITLE				Ţ	Change	☐ Addition
	600 N BRAND BLVD #300		3.2 NAME						
STREET ADDRESS	GLENDALE CA		3.3 STREET AD		1 5. West				
CITY-ST-ZIP TITLE	VDS	EJ DULTE	3 4 CITY - ST - Z	Glo	endale !	CA	91201		
NAME.	HAVNER, RONALD L., JR.	☐ DELETE	4. 1 TITLE				E	Change .	☐ Add tion
	600 N BRAND BLVD #300		4.2 NAME				Λ.,		
STREFT ADDRESS	GLENDALE CA		43 STREFT ADD	1 ,					
CITY ST-ZIP THILE	D)	C) DECET	44 CITY - ST - ZI	GI	endale	CA	9120		
1	Curtis, Vern O.	DELETE	5 1 TITLE				C	Change :	Addition
NAME CENTEL ADDRESS	4111 STILLWATER DR		52 NAME						
STREET ADDRESS	HUNTINGTON BCH CA		5 3 STREET ADD		113 NW Fro				
CITY-ST-ZIP TITLE	D DOMINGTON BON CA	f north	5 4 CiTY-ST-7i	Por	tland of	و 9	7229		<u> </u>
	STEELE, JACK D.	DELETE	6. 1 TITLE					Change	Addition
NAME STHEET ADDRESS	1625 MICHAEL LANE		6.2 NAME				AM	را. لا	Addition XX
STREET WORKESS	INCO MININCLE LANGE		6.3 STREET ADO	DECC I			1/4	~ L1"/	, a 1 ~ 1

PACIFIC PAUSADES CA

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if alloyed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-94 (818)244-808D

CR2E034 (12/95)