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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000028162 (3)

Corporation Name
 DOWNTOWN MINI STORAGE OF AVON PARK, INC.

Principal Place of Business Mailing Address **5 WEST WALNUT STREET** 5 WEST WALNUT STRETE **AVON PARK FL 33825** AVON PARK FL 33825 3. Date incorporated or Qualified 3a. Date of Last Re 04/11/1994 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0479523 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certif-cate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio 2mCountry 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MICHAELSON, JAMES M Street Address (P.O. Box Number is Not Acceptable) 82 4430 ADDISON PLACE SARASOTA FL 34241 83 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. DATE. Stunature, typed or printed has in of registered agent and the flagourable INFTE: Relastered Agent signature required when reinst chiqu (12/95) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1 1 TITLE Change Addition CHAPMAN, CHARLES A NAME 1.2 NAME CR2E034 PO BOX 4073 N/A STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34230 CITY-ST-ZIP 1 4 CITY - ST - ZIF DELETE TITLE 2 1 TIFLE Change Addition MICHAELSON, JAMES M NAME 2.2 NAME 4430 ADDISON PLACE STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34241 CITY - ST - ZIP 2 4 CITY - ST - ZIF TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS City-St-ZiP 3.4 CITY - ST - ZIF TITLE DELETE Change Addition 4 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4 4 CITY - ST - ZIF DELETE TITLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP DELETE TITLE Addition 6.1 TIBLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 supplienental 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 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 changed, or on an attachment with an address.

64 CITY-ST-ZIP

SIGNATURE:

ames M. Michaelson

April 18, 1996 941-453-0850