

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

FILED
May 24 1996 8:00 am
Secretary of State

DOCUMENT # P94000039312 (1)

1. Corporation Name

RIDGEWOOD STORAGE AND MINI WAREHOUSES, INC.



Principal Place of Business

Mailing Address

**318 MADISON AVE.
STATION A
DAYTONA BEACH FL 32114
US**

**P.O. BOX 6206
STATION A
DAYTONA BEACH FL 32122-6206**

3. Date Incorporated or Qualified
05/20/1994

3a. Date of Last Report
02/27/1995

2. Principal Place of Business
21 **320 MADISON AVE**

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 **DAYTONA BEACH**

24 Zip **32114**

25 Country **USA**

27 City & State

29 Zip

30 Country

4. FEI Number
59-3234930

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DELPERCIO, ANTOINETTE D
320 MADISON AVE
DAYTONA BEACH FL 32114**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent (if a third party)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **D DELPERCIO, ANTOINETTE D**
STREET ADDRESS **320 MADISON AVE**
CITY-ST-ZIP **DAYTONA BEACH FL 32114**

TITLE DELETE
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CITY-ST-ZIP

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 changed, or on an attachment with an address.

SIGNATURE:

Antoinette D. Del Percio
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/21/96

904-288-7373
Daytona Phone #

CR2E034 (12/95)