

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2005 8:00 am
Secretary of State

03-01-2005 90069 045 ***150.00

DOCUMENT # P94000071292

1. Entity Name

AAA-MINI STORAGE, INC.



Principal Place of Business

2601 E ORANGE AVE
EUSTIS FL 32726

Mailing Address

2601 E ORANGE AVE
EUSTIS FL 32726

50020379



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COFFMAN, HAROLD V.
1502 FAHNSTOCK ST.
EUSTIS FL 32726

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME COFFMAN, HAROLD V. ☒ Delete
STREET ADDRESS 1502 FAHNSTOCK STREET
CITY-ST-ZIP EUSTIS FL 32726

TITLE ☒ Change ☐ Addition
NAME **Coffman, Michael H., PRESIDENT**
STREET ADDRESS **2601 E. ORANGE AVE.**
CITY-ST-ZIP **EUSTIS, FL 32726**

TITLE ☐ Delete
NAME **Coffman HAROLD V.**
STREET ADDRESS **1502 FAHNSTOCK ST. VICE-**
CITY-ST-ZIP **EUSTIS, FL 32726** **PRESIDENT**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **RUTH PORTER, SECT.**
STREET ADDRESS **2601 E. ORANGE AVE**
CITY-ST-ZIP **EUSTIS, FL 32726**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Harold V. Coffman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 21, 2005

Date

352-589-7879

Daytime Phone #