

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000081970

FILED
Mar 02, 2005
Secretary of State

Entity Name: ARCHER ROAD SELF STORAGE INC.

Current Principal Place of Business:

6505 SW ARCHER RD
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

4421 NW 65 TERR
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-3277956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KISH, JOHN J
4421 NW 65 TERRACE
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: KISH, KATHLEEN B.
Address: 4421 NW 65 TERR
City-St-Zip: GAINESVILLE, FL

Title: PD () Delete
Name: KISH, JOHN J
Address: 4421 NW 65 TERR
City-St-Zip: GAINESVILLE, FL

Title: VD () Delete
Name: KAPLAN-STEIN, ROBERT
Address: 13429 NW 32 PLACE
City-St-Zip: GAINESVILLE, FL

Title: D () Delete
Name: KAPLAN-STEIN, DALE
Address: 13429 NW 32 PLACE
City-St-Zip: GAINESVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: JOHN KISH

PD

03/02/2005

Electronic Signature of Signing Officer or Director

_____ Date