

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000057880 (3)

1. Corporation Name

ABSOLUTE STORAGE, INC.



Principal Place of Business

800 WEST LANDSTREET ROAD
ORLANDO FL 32824

Mailing Address

800 WEST LANDSTREET ROAD
ORLANDO FL 32824

3. Date Incorporated or Qualified
07/26/1995

3a. Date of Last Report

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-3322404

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

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

REECE, WAYNE F
800 WEST LANSTREET ROAD
ORLANDO FL 32824

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 607.1506, 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 applicable)

Signature typed or printed name of new registered agent (if applicable)

Date

12. OFFICERS AND DIRECTORS

TITLE D
NAME REECE, WAYNE F
STREET ADDRESS 800 WEST LANDSTREET ROAD
CITY-ST-ZIP ORLANDO FL 32824

DELETE

TITLE D
NAME REECE, BRIAN
STREET ADDRESS 800 WEST LANDSTREET ROAD
CITY-ST-ZIP ORLANDO FL 32824

DELETE

TITLE D
NAME REECE, WAYNE P
STREET ADDRESS 15 SOUTH MAGNOLIA AVENUE
CITY-ST-ZIP ORLANDO FL 32801

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/S Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE P/D Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE T/D Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Vice President Change Addition

4.2 NAME MARY T. REECE

4.3 STREET ADDRESS 800 West Landstreet Road

4.4 CITY-ST-ZIP ORLANDO, FL 32824

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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:

Brian Reece
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/96
Date

407-855-1062
Telephone Number

CR2E034 (12/95)