

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2004 8:00 am
Secretary of State

07-21-2004 90027 047 ***150.00

DOCUMENT # P96000061892

1. Entity Name
SPACE PLUS AT 17TH STREET AND MIAMI ROAD, INC.



Principal Place of Business
**1850 S. MIAMI RD AY
FORT LAUDERDALE, FL 33316**

Mailing Address
**1850 S. MIAMI RD AY
FORT LAUDERDALE, FL 33316**

44049204

2. Principal Place of Business

1850 S. Miami Road
Suite, Apt. #, etc.

3. Mailing Address

1850 S. Miami Road
Suite, Apt. #, etc.

06302004 Chg-P CR2E034 (10/03)

City & State

Fort Lauderdale, FL 33316

City & State

Ft. Lauderdale, FL 33316

4. FEI Number
65-0681226

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CHANEY, MARVIN T
1850 S. MIAMI RD
FT. LAUDERDALE, FL 33316**

Name
CHANEY, CONNIE
Street Address (P.O. Box Number is Not Acceptable)
1850 S. Miami Road

City **Ft. Lauderdale** **FL** Zip Code **33316**

7. Name and Address of New Registered Agent

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 \$550.00
Due by September 8, 2004**

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 **PSTD** ☒ Delete
NAME **CHANEY, MARVIN T**
STREET ADDRESS **3033 SPANISH RIVER RD**
CITY-ST-ZIP **BOCA RATON, FL 33432**

TITLE **PSTD** ☐ Change ☒ Addition
NAME **CHANEY, CONNIE**
STREET ADDRESS **3033 Spanish River Road**
CITY-ST-ZIP **Boca Raton, FL 33432** ☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

Connie Chaney **CONNIE CHANEY** 6/30/04 954-523-8900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



**SPACE
PLUS**
Self Storage
Center

Attachment
44049204

June 30, 2004

Division of Corporations
P O Box 6198
Tallahassee, FL 32314

RE P96000061892 and A96000001393 and A18671

To Whom It May Concern

Please be advised that I received your Notice of Intent to Dissolve. This was my first receipt that anything had not been filed or was owing.

My husband and I were divorced on April 15, 2004 and he was running the company until the middle of March, 2004. I am enclosing a copy of the Marital Settlement Agreement and Release and Assignment of Interest in Space Plus. I have not received any type of mailing regarding this and ask that you give consideration in this matter because I was not aware of this and had received no mailing on this prior to this Notice.

Thank you for your anticipated cooperation. If you have any questions, please call me at 954-523-8900.

Very truly yours,


CONNIE CHANEY