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FILED
May 22 1998 8:00am
Secretary of State

• PROFIT
• CORPORATION
• ANNUAL REPORT
1998

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

DOCUMENT # P96000095145 (4)

1. Corporation Name
MINI STORAGE DEPOT, INC

Principal Place of Business
3500 RADIO ROAD
NAPLES FLA 34104
USA

Mailing Address
SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/18/1996

2. Principal Place of Business
21

2a. Mailing Address
26

4. FEI Number
59-3435513
☐ Applied For
☐ Not Applicable

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

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

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip
24

Country
25

Zip
29

Country
30

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

JONES, WILLIAM L.
3500 RADIO ROAD
NAPLES, FLA 34104

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSVT	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	JONES, WILLIAM L.		1.2 NAME		
STREET ADDRESS	3500 RADIO ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FLA 34104		1.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	JONES, BRIAN E.		2.2 NAME		
STREET ADDRESS	3500 RADIO RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FLA 34104		2.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	JONES, BRIAN F.		3.2 NAME		
STREET ADDRESS	3500 RADIO ROAD		3.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FLA 34104		3.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	JONES, BARBARA F.		4.2 NAME		
STREET ADDRESS	3500 RADIO ROAD		4.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FLA 34104		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	600002534566	
STREET ADDRESS			6.3 STREET ADDRESS	-05/26/98--01022--007	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***150.00	

14. 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 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: William L. Jones 5/5/98 941 643 5100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/97)