

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000002426

1. Entity Name
CITRUS SPRINGS MINI-STORAGE, INC.



Principal Place of Business
**7465 N. FLORIDA AVE
CITRUS SPRINGS, FL 34434 US**

Mailing Address
**7465 N. FLORIDA AVE
CITRUS SPRINGS, FL 34434 US**



04242008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3418073	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**AYRES, GARY
7465 N. FLORIDA AVE.
CITRUS SPRINGS, FL 34465**

**DO NOT WRITE
IN THIS SPACE**

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

GARY AYRES
(NOTE: Registered Agent signature required when reinstating)

4-24-08
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

U00000928776
05/21/08-80043-004 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	AYRES, GARY
STREET ADDRESS	4719 NORTH CAPISTRANO LOOP
CITY-ST-ZIP	BEVERLY HILLS, FL 34465

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *GARY AYRES* *GARY AYRES* *4-24-08* *352-465-7500*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #