

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90076 001 ***158.75

US59510 AV

DOCUMENT # P97000012141

1. Entity Name
MINI STORAGE DEVELOPERS, INC.

Principal Place of Business
2225 MONET ROAD
NORTH PALM BEACH FL 33410

Mailing Address
2225 MONET ROAD
NORTH PALM BEACH FL 33410

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **84-1392943**

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

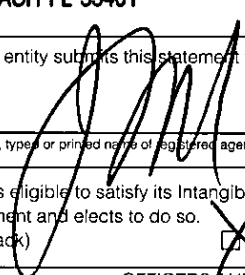
6. Name and Address of Current Registered Agent

BADE, J. BRUCE
C/O ROGERS, BOWERS, ET AL
505 S FLAGLER DRIVE SUITE 1330
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name **J. BRUCE BADE**
 Street Address (P.O. Box Number is Not Acceptable)
2225 MONET RD
 City **N. PALM BEACH** **FL** Zip Code **33410-3448**

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.

SIGNATURE  **2-15-02**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	BADE, J. BRUCE	2225 MONET ROAD	WEST PALM BEACH FL 33410	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P, D	J. BRUCE BADE	2225 MONET RD	NORTH PALM BEACH, FL 33410-3448	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T, S, D	MONIQUE L. BADE	2225 MONET RD	N. PALM BEACH, FL 33410-3448	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

3-1-02
 Date

861-371-6600
 Daytime Phone #

CR2E034 (9/01)