

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000019458

FILED
Oct 14, 2004
Secretary of State

Entity Name: SECURE STORAGE OF BONITA SPRINGS, INC.

Current Principal Place of Business:

4381 S TAMIAMI TR
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

24381 S TAMIAMI TR
BONITA SPRINGS, FL 34134 US

Current Mailing Address:

4501 NORTH TAMIAMI TRAIL, #300
NAPLES, FL 34103

New Mailing Address:

9813 CHELSEA PLACE
NAPLES, FL 34109

FEI Number: 65-0735966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAINS, TIMOTHY G
4501 NORTH TAMIAMI TRAIL, #300
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

HAINS, TIMOTHY G
1395 PANTHER LANE
NAPLES, FL 34109 US

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: TIMOTHY G. HAINS

10/14/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KIUBERDANZ, WALLACE J
Address: 4501 N TAMIAMI TR #300
City-St-Zip: NAPLES, FL 34103

Title: VPD () Delete
Name: ATTANASIO, DREW N
Address: 85 CARIBBEAN RD
City-St-Zip: NAPLES, FL 34108

Title: S () Delete
Name: ATTANASIO, KAREN
Address: 85 CARIBBEAN RD
City-St-Zip: NAPLES, FL 34108

Title: T () Delete
Name: KLUBERDANZ, LOIS I
Address: 4501 N TAMIAMI TR #300
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KIUBERDANZ, WALLACE J
Address: 656 HICKORY ROAD
City-St-Zip: NAPLES, FL 34108

Title: VPD (X) Change () Addition
Name: ATTANASIO, DREW N
Address: 9813 CHELSEA PLACE
City-St-Zip: NAPLES, FL 34109

Title: S (X) Change () Addition
Name: ATTANASIO, KAREN
Address: 9813 CHELSEA PLACE
City-St-Zip: NAPLES, FL 34109

Title: T (X) Change () Addition
Name: KLUBERDANZ, LOIS I
Address: 656 HICKORY ROAD
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DREW N. ATTANASIO

VP

10/14/2004

Electronic Signature of Signing Officer or Director

Date