2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 03, 2006 8:00 am **DOCUMENT # P97000025428** Secretary of State SEFFNER SELF STORAGE - WEST, INC. 02-03-2006 90018 044 ***150.00 Principal Place of Business Mailing Address 1472 DR MARTIN LUTHER KING BLVD PO BOX 684 SEFFNER, FL 33584 MANGO, FL 33550 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01132006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 59 3413751 59-3363465 See Copy Not Applicable Zip Country [[[] Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CREASON, CHERYL Street Address (P.O. Box Number is Not Acceptable) 105 7TH AVENUE RUSKIN, FL 33570 City Zip Code 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, typed or printed hame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!!..FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 1-352-588-1043 TITLE ☐ Delete TITLE ☐ Addition McBride, Atthur E 29621 Bay Head Road MCBRIDE, ARTHUR E NAME NAME 29621 Bay HeAd STREET ADDRESS 7501 WILLIAMS RD STREET ADDRESS de City, FL 38523 Road Dade City Fl CITY-ST-ZIP SEFFNER, FL 33584 CITY-ST-ZIP TITLE Change ☐ Addition MCBRIDE, PATRICIA E NAME NAME 3611 PETTICOAT JCT 1-813- 310-7485 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VALRICO, FL 33594 1-813-571-7477 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME

FILED

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.

STREET ADDRESS

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Patricia EMSBrise Patricia EMSBRIS-310.7485
SIGNATURE: Date 1-1606813-310.7485

OGDEN UT 84201-0034

ATTACHMENT ADOU8681 OMB Clearance No.: 1545-0130

In reply refer to: 0427404752 May 16, 2005 LTR 3875C E 59-3363465 200412 02 000

19499

BODC: SB

SEFFNER SELF STORAGE WEST INC PO BOX 684 MANGO FL 33550



000091

Taxpayer Identification Number: 59-3363465

Form: 1120S

Tax Period: Dec. 31, 2004

Dear Taxpayer:

We received your return referenced above under taxpayer identification number (TIN) 59-3413851. Our records show you were assigned TIN 59-3363465 so we are processing your return using that TIN. You should file using that TIN for any future filings.

If you have any questions, please call us toll free at 1-800-829-0115.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include a copy of this letter and, in the spaces below, provide us with a telephone number with the hours we can reach you. Also, you should keep a copy of this letter for your records.

| Telephone | Number | (|) | Hours |
|-----------|--------|---|---|-------|
|-----------|--------|---|---|-------|

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Marlene Waters

Marlene Waters
Dept. Manager, Input Corrections

Copy to 2006 For Profit Corporation annual Report

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Second Copy 7-12

Maded copy to above 5-1605