

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90016 020 ***150.00

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1. Entity Name
APOLLO BEACH MINI-STORAGE, INC.



Principal Place of Business
**313 APOLLO BEACH BLVD.
APOLLO BEACH, FL 33572 US**

Mailing Address
**313 APOLLO BEACH BLVD.
APOLLO BEACH, FL 33572 US**

DO NOT WRITE IN THIS SPACE



02072006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3508437

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CURATELLI, JOHN J JR
2109 E PALM AVE #104
APOLLO BEACH, FL 33605**

Tampa

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/20/06
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **PHAGAN, RICHARD L**
STREET ADDRESS **8370 COCOA LANE**
CITY-ST-ZIP **APOLLO BEACH, FL 33572**

TITLE **VT**
NAME **MCMAHAN, PAUL W**
STREET ADDRESS **3901 BRISCOE RD**
CITY-ST-ZIP **PARKERSBURG, WV 26104**

TITLE **VS**
NAME **CURATELLI, JOHN J JR**
STREET ADDRESS **2109 E PALM AVE #104**
CITY-ST-ZIP **TAMPA, FL 33605**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Richard L Phagan, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/06 813-645-8880
Date Daytime Phone #