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2005 FOR PROFIT CORPORATION ANNUAL REPORT				Apr 14, 2005 08:00			
DOCUMENT # P97000074934 1. Entity Name BRIARWOOD STORAGE, INC.					5	Secretary	oi Sta
Principal Plac 207 BRIARN BUNNELL, F		Mailing Address PO BOX 1525 BUNNELL, FL 32110]), 88()) (886) 8 (5) (5) (5)	
DO NOT WRITE IN THIS SPA			CE	04042005	No Chg-P	CR2E034 (10/0	
		. <u>.</u>		59-34711 5. Certificate of			Not Applicable Additional
6. Name and Address of Current Registered Agent CRAIN, CHARLES R JR. 3070 CR 304 BUNNELL, FL 32110				IN TI	NOT W HIS SP	ACE	
8. The above the obligat	e named entity submits this statement for l tilons of registered agent.				in the State of Flo		th, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registerer 9. Efection Campaign Finan Trust Fund Contribution.				.00 May Be		DATE	· .
10.	OFFICERS AND D	IRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-2IP	PD CRAIN, CHARLES F JR.				U0000 04/14/05	00304374 -80040-010	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CRAIN, CRISTAL B 3070 CR 304 _ BUNNELL, FL 32110						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u></u>	DO N	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
TITLE NAME STREET ADDRESS							

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #

CITY-ST-ZIP