

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 24 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000080306 (8)**

1. Corporation Name

**OPEN STORAGE, INC.**



Principal Place of Business

Mailing Address

**3884 PROSPECT AVENUE  
NAPLES FL 34104**

**3884 PROSPECT AVENUE  
NAPLES FL 34104**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	<b>3884 Prospect Ave.</b>	26	<b>3884 Prospect Ave.</b>	<b>09/15/1997</b>	
City & State		City & State		4. FEI Number	
22	<b>Naples, Florida</b>	27	<b>Naples, Florida</b>	<b>65-0825079</b>	
23	<b>34104</b>	28	<b>34104</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24	Country <b>US</b>	29	Country <b>US</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
25		30		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WINNIE, JOHN S  
WINNIE AND WINNIE ATTORNEYS  
1100 FIFTH AVENUE SOUTH #211  
NAPLES FL 34102**

81	Name	<b>MCCORMICK, HARVEY D.</b>	
82	Street Address (P.O. Box Number is Not Acceptable)	<b>5455 Sycamore Drive</b>	
83	City	<b>Naples, Florida</b>	
84	State	85	Zip Code
	<b>FL</b>		<b>34119</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **4-20/1998**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PRESIDENT</b>	1.1 TITLE	<b>PST</b>
NAME	<b>HARVEY D MCCORMICK</b>	1.2 NAME	<b>MCCORMICK, HARVEY D.</b>
STREET ADDRESS	<b>5455 SYCAMORE DRIVE</b>	1.3 STREET ADDRESS	<b>5455 Sycamore Drive</b>
CITY-ST-ZIP	<b>NAPLES FL 34119</b>	1.4 CITY-ST-ZIP	<b>Naples, Florida 34119</b>
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* DATE **4-5-98**

CR2E034 (10/97)