2004 FOR PROFIT CORPURATION ANNUAL REPORT

DOCUMENT # P98000012791 1. Entity Name HANDY DAN SELF STORAGE, INC.



FILED Feb 02, 2004 08:00 AM Secretary of State

Principal Place of Business 10648 SOUTHERN BLVD WEST PALM BEACH, FL 33411 Mailing Address 2755 HANCOCK CREEK RD. WEST PALM BEACH, FL 33411

DO NOT WRITE IN THIS SPACE

01242004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For 65-0879272 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HANLEY, DANIEL J 2755 HANCOCK CREEK ROAD WEST PALM BEACH, FL 33411

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the plans of registered agent.	ourpose of changing its registere	d office or r —	egistered agent, or bo	oth, in the State of Florida. I am fan	iliar with, and accept	
SIGNATURE_							
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when refrestating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing .	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HANLEY, DANIEL J 2755 HANCOCK CREEK ROAD WEST PALM BEACH, FL 33411			·	U00000031021 02/04/04-80131-019 150.00		
RITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HANLEY, MARGARET 2755 HANCOCK CREEK ROAD WEST PALM BEACH, FL 33411		i				
TITLE NAME STREET ADDRESS GTY-ST-ZIP				DO	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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.							

NATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR