

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90138 046 ***158.75

DOCUMENT # **P98000041122**
1. Entity Name
S & H STORAGE, INC. ✓

DO NOT WRITE IN THIS SPACE

817006

2. Principal Place of Business
8703 CYPRESS RESERVE CIRCLE
Suite, Apt. #, etc.

3. Mailing Address
8703 CYPRESS RESERVE CIRCLE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ORLANDO, FL
Zip
32836
Country

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ORLANDO, FL
Zip
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Country

4. FEI Number
65-0839547
Applied For
☐ Not Applicable
5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name **CASEY HERLIHY**
Street Address (P.O. Box Number is Not Acceptable)
7912 MARBELLA CT
City **ORLANDO** FL Zip **32836**

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.

SIGNATURE **C. Herlihy** **CASEY HERLIHY** **1/18/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) (DATE)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ALAN M. SEGALL 5220 NE 28TH AVE FT. LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT CASEY D HERLIHY 7912 MARBELLA CT ORLANDO, FL 32836
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IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **C. Herlihy, VP** **1/18/02** **407-876-0729**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)