

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000083018

FILED  
Feb 10, 2009  
Secretary of State

Entity Name: SELF STORAGE OF SOUTH DADE, INC.

**Current Principal Place of Business:**

4005 NW DEER OAK DRIVE  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

4005 NW DEER OAK DRIVE  
JENSEN BEACH, FL 34957

**New Mailing Address:**

FEI Number: 65-0868480      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POTTS, ROY F JR  
4005 NW DEER OAK DRIVE  
JENSEN BEACH, FL 34957      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: POTEET, KENNETH W  
Address: 27500 SW 164TH COURT  
City-St-Zip: HOMESTEAD, FL 33031

Title: V ( ) Delete  
Name: MATTHEWS, EDWARD L  
Address: 13040 SW 69TH CRT  
City-St-Zip: MIAMI, FL 33156

Title: ST ( ) Delete  
Name: POTTS, ROY F JR  
Address: 4005 NW DEER OAK DRIVE  
City-St-Zip: JENSEN BEACH, FL 34957

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROY F POTTS, JR

ST

02/10/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date