

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2000 8:00 am
Secretary of State
 09-12-2000 90238 020 ***550.00

DOCUMENT # **PA9000051610**

1. Entity Name
Totally Storage, Inc.

Principal Place of Business
37 Skyline Drive
Suite #3104
Lake Mary, FL 32746

Mailing Address
SAME

2. Principal Place of Business
37 Skyline Drive
 Suite, Apt. #, etc.
Suite #3104
 City & State
Lake Mary, Florida
 Zip
32746
 Country
US

3. Mailing Address
37 Skyline Drive
 Suite, Apt. #, etc.
Suite #3104
 City & State
Lake Mary, Florida
 Zip
32746
 Country
US

A0076881
 DO NOT WRITE IN THIS SPACE
 4. FEI Number
59-3581323
 Applied For
 Not Applicable
 5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
Martin G. Legat
Totally Storage, Inc.
37 Skyline Drive Suite #3104
Lake Mary, Florida 32746

7. Name and Address of New Registered Agent
 Name **Totally Storage, Inc.**
 Street Address (P.O. Box Number is Not Acceptable)
37 Skyline Drive
Suite #3104
 City **Lake Mary** **FL** **32746**

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 Martin G. Legat, President (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) ☒ **FILE NOW!!! FEE \$150.00**
After MAY 1, 2000 Fee will be \$550.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	President/Director/Agent	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	Martin G. Legat		NAME		
STREET ADDRESS	37 Skyline Drive Suite #3104		STREET ADDRESS		
CITY-ST-ZIP	Lake Mary, FL 32746		CITY-ST-ZIP		
TITLE	Secretary/Director	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	Kathy Ducker		NAME		
STREET ADDRESS	37 Skyline Drive Suite #3104		STREET ADDRESS		
CITY-ST-ZIP	Lake Mary, FL 32746		CITY-ST-ZIP		
TITLE	Director	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	Gary Denomy		NAME		
STREET ADDRESS	37 Skyline Drive #3104		STREET ADDRESS		
CITY-ST-ZIP	Lake Mary, FL 32746		CITY-ST-ZIP		
TITLE	Director	☐ Delete	TITLE		☐ Change ☒ Addition
NAME	Dan Pieplow		NAME		
STREET ADDRESS	37 Skyline Drive Suite #3104		STREET ADDRESS		
CITY-ST-ZIP	Lake Mary, FL 32746		CITY-ST-ZIP		
TITLE	Director	☐ Delete	TITLE		☐ Change ☒ Addition
NAME	Cathy Smith		NAME		
STREET ADDRESS	37 Skyline Drive Suite #3104		STREET ADDRESS		
CITY-ST-ZIP	Lake Mary, FL 32746		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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

SIGNATURE: Martin G. Legat **9/7/00** **(407) 804-0727**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)