2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

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DOCUMENT # P99000066199 1. Entity Name					Mar 16, 2006 08:00 AM Secretary of State				
EAST MA	RION SELF STORAGE, INC	. .							
Principal Place of Susiness		Mailing Address							
16005 EAST HIGHWAY 40		16005 EAST HIGHWAY 40							
SILVER SPF	IINGS FL 34488	SILVER SPRINGS FL 34	488						
2. Principal Place of Business		3. Mading Address			. , , , , , , , , , , , , , , , , , , ,	or the term levil sent sent			ignesi () (gg)
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1st	MOORE	CR2E034	(10/05)	
City & State		City & State			4. FEI Number	59-358224	0		pplied For lot Applies
Zip .	Country	ZIP	Country		5. Certificate o	f Status Desired		\$8.75 Ad Fee Require	
	6. Name and Address of Current	Registered Agent	Name		7. Name and A	Address of New F	Registered A	lgent	·
WELL BONGE IN									
160	EY, BRUCE W 05 EAST HIGHWAY 40		Street A	Street Address (P.O. Box Number is Not Acceptable)					
SIL	/ER SPRINGS FL 34488			·					
			City				FL	Zip Cod	ie
	named entity submits this statement to	or the purpose of changing its re	egistered office o	r register	ed agent, or both	, in the State of FI	orida. Lam 1	amiliar with	and acc
SIGNATURE									
	Signature, typed or printed memo of registered agen-	and title if applicable [NOTE:	Registered Agent signar	tura required	when remstating)		DATE		
After	ILE NOW!!! FEE IS \$150.00 May 1, 2006 Fee Will Be \$550.00 Payable to Florida Department of					9. Election Camp Trust Fund Cor	-		.00 May led to Fec
10.	OFFICERS AND	State deal of	tt.		ADDITIONS/C	HANGES TO OFF	ICERS AND	DIRECTOR	RS IN 11
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NAME	WILEY, BRUCE W		NAME	}		40000004 93/25/06-8	169107		
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12. Thereby cartify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 direct 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 it changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

3.3.06 352-625