


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90234 033 ***150.00

DOCUMENT # S15968 1. Entity Name TOWER MINI STORAGE, INC.	
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Principal Place of Business 1479 BAY POINT DRIVE SARASOTA, FL 34236	Mailing Address 1479 BAY POINT DRIVE SARASOTA, FL 34236
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60033992



04272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3048297	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, JOHN F.
330 SOUTH ORANGE AVE.
SARASOTA, FL 34236

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HENDERSON, JAMES D.
STREET ADDRESS	730 RELLIM LANE
CITY-ST-ZIP	SARASOTA, FL
TITLE	D
NAME	HENDERSON, DAVID P.
STREET ADDRESS	1479 BAY POINT DR
CITY-ST-ZIP	SARASOTA, FL
TITLE	D
NAME	HENDERSON, MICHELLE
STREET ADDRESS	730 RELLIM LANE
CITY-ST-ZIP	SARASOTA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: David Henderson **David Henderson** 4-28-2006 941-371-5995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #