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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # V31769

(5)

BURNS ROAD SELF STORAGE, INC.

FILED Apr 08 1997 8:00am Secretary of State



2562 WEST IND	DIANTOWN RD.	2562 WEST INDIANTOWN	RD.	ŀ				
SUITE 8		SUITE 8						
JUPITER FL 33	158	JUPITER FL 33458-3936		<u></u>				
							Date of Last Report 02/08/1996	
2. Principal Pl	ace of Business	2a. Mailing Address		4, FEI Nur		<u> </u>	App	lied For
21 U139	BURNES ROAD	26		65-0	360104	Ī	Not	Applicable
Suite, Apt		Suite, Apt. #, etc.				□ \$8	.75 A	dditional
22		27		5. Certifica	ate of Status Desired	□ * °	ee Rec	uired
City & State)	City & State		6. Election	Campaign Financing	\$!	5.00 N	Jav Re
23 Paum	BEACH GARDENS FL	28 JAUN BEACH GI	PROPERLS EV		und Contribution		dded to	
Zid	Country	Zip	Country		rporation has liability for i	intengible tax ur	nder s	199 032
24 334	LIO 25 USA	29 33410	30 USA	I '		Yes No	idoi o.	TOO.GOL,
<u> </u>	9. Name and Address of Current	1=7	00 0		and Address of New Re			
KELI	Y, GEORGE T IV		81 Nam					
	W. INDIANTOWN ROAD		<u> </u>	· · · · · · · · · · · · · · · · · · ·				
					Number is Not Acceptab	ole)		
SUIT			63	39 BURNS	KO622	,, . , , , , , , , , , , , , , , , , ,		
JUPI	TER FL 33458		63					
			84 City			85	Zip C	ode
			I PA	um BEACH	BARDENS	. .	Zip C	lio
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligat	and 607.1508, Florida Statut	es, the above-name	d corporation submit	ts this statement for the p	urpose of chan	ging its	registered
office or n	egistered agent, or both, in the State of	f Florida. Such change was a	authorized by the or	rporation's board of	directors. I hereby accep	ot the appointme	ent as r	egistered
agent, ra	m laminar with, and accept the obligat	ions or, socion bortoso, mi	mua olalules.					
•								
SIGNATURE			:		,	DATE		
SIGNATURE	Signature Typed or printed name of registered agent	and title if applicable (NOT	E: Registered Agent signal	re required when reinstating		DATE	OTOBS	161 40
SIGNATURE	OFFICERS AND	and the if applicable (NOT DIRECTORS	E: Registered Agent eignal	re required when reinstating) NS/CHANGES TO OFFIC	ERS AND DIRE		
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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 12 or Block 13 if change or on an attachment with an address.

SIGNATURE:

TURE NO TYPES OF THIMES TAME & SIGNING OFFICER OR DIRECTOR

Daytime Phone #