## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

14. Thereby certify that the information supplied with this filing does indicated on this annual report or supplemental annual report is officer or director of the corporation of the re-giver of trusted fin Block 12 or Block 13 if changed, of on an attachment will a rac

(2)

CROWN MINI STORAGE, INC.

**FILED** Apr 23 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			511 21211 61911 61911 41911 1991
1880 DE SOTO RO 1880 DE SOTO RD					
SARASOTA FL 34234 SARASOTA FL 34234			DO NOT WRITE IN THIS SPACE		
US US			3. Date Incorporated or Qualified		
5010	I this Location	1		06/12/1992	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 566			M SHE	65-0339592	Not Applicable
Suite, Apl.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	1 21	City & State	~1	6. Election Campaign Financing	\$5.00 May Be
23 Brad	arton Fl	28 Braden Ton	1, Fl	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	surrent year Intangible
24 34 7	03 25 Manatee	, 29 34203	30 Manatee	Personal Property Tax due June 30.	Yes No
	<ol><li>Name and Address of Curre</li></ol>		,	10. Name and Address of New Registere	d Agent
MA	TTHEWS, TERENCE		81 Name		;
5190 26 STR W 82 Street Address				ress (P.O. Box Number is Not Acceptable)	
STE D					
BR/	ADENTON FL 34203		83		
			84 City		85 Zip Code
			OT City	F	L   63   2.15 0000
11. Pursuant t	o the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpose	of changing its registered
office or re	e <b>gister</b> ed agent, or both, in the State in <b>fam</b> iliar with, and accept the oblic	e of Florida. Such change was at pations of, Section 607,0505, Flor	imorized by the corporat ida Statutes.	tion's board of directors. I hereby accept the ap	opoiniment as registered
SIGNATURE	,				
ardinations.	Signature, typed or printed name of registered ag	rest and title if applicable (NOTE	Registered Agent signature requir		
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	HANEY, JAMES D		1.2 NAME		
STREET ADDRESS	1880 DE SOTO RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	21 TITLE		Change Addition
NAME	HANEY, MICHAEL D		22 NAME		
STREET ADDRESS	1880 DE SOTO RD		2 3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2. 4 CITY-ST-ZIP		
TITLE	8	☐ DELETE	3.1 TITLE		Change
NAME	HANEY, DAYNA K		3 2 NAME		
STREET ADDRESS	1880 DE SOTO RD		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		3.4. CITY-ST-ZIP		
TITLE	T	DELETE	4.1 TiTLE		Change Addition
NAME	HANEY, JOYCE M		4. 2 NAME		
STREET ADDRESS	1880 DE SOTO RD		4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP		ļ
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	<del></del>	DELETE	6.1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
			6.4 CITY-ST-ZIP		
14. I hereby c	ertify that the information supplied	with this filling does not quality for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated	on this annual report or supplemen	al annual report is tue and accu	rate and that my signatu	Section 119.07(3)(i), Florida Statutes. I further ure shall have the same legal effect as if made upined by Chapter 607. Florida Statutes: and the	under cath; that I am an
Officer or o	director of the corporation of the re	leiver or trusted impoyered to e	xecule alls report as req	uired by Chapter 607, Florida Statutes; and tha	a my name appears in