2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

FILED Feb 20, 2004 08:00 AM Secretary of State DOCUMENT # ¥43429 1. Entity Name CROWN MINI STORAGE, INC. Principal Place of Business Mailing Address 5550 15TH STREET E SARASOTA FL 34203 5550 15TH STREET E SARASOTA FL 34203 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) Applied For City & State 4. FEI Number City & State 65-0339592 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MATTHEWS, TERENCE Street Address (P.O. Box Number is Not Acceptable) 5190 26 STR W STE D **BRADENTON FL 34203** City Zin Code 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME HANEY, JAMES D U00000059700 STREET ADDRESS STREET ADDRESS 5550 15TH ST E 02/23/04-80010-015 150.00 BRADENTON FL 34203 CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change Addition TITLE HANEY, MICHAEL D NAME NAME STREET ADDRESS 5550 15TH ST E STREET ADDRESS City-St-Zip BRADENTON FL 34203 CITY-ST-ZIP ☐ Change noilibhA [Delete TITLE TITLE NAME NAME HANEY, DAYNA K STREET ADDRESS STREET ADDRESS 5550 15TH ST E CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203** ☐ Delete TITLE ☐ Change ☐ Addition TITLE HANEY, JOYCE M NAME NAME 5550 15TH ST E STREET ADDRESS STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 suppliermental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.