# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

### SIGNATURE: KIM S KELLEY

VP

SUITE 700 City-State-Zip: LAKELAND FL 33801

ALTMAN, JAMES BRIAN **500 S FLORIDA AVENUE** 

Title

Name

Address

Electronic Signature of Signing Officer/Director Detail

The above name	d entity submits this statement for the purpose of changing i	its registered office or regis	tered agent, or both, in the State of Florida
SIGNATURE	E: BENJAMIN D FALK		0
	Electronic Signature of Registered Agent		
Officer/Dire	ctor Detail :		
Title	D	Title	PCEO
Name	MAXWELL, LAWRENCE W	Name	DROST, WILLIAM D
Address	500 S FLORIDA AVE SUITE 700	Address	500 S FLORIDA AVE SUITE 700
City-State-Zip:	LAKELAND FL 33801	City-State-Zip:	LAKELAND FL 33801
Title	VCFO	Title	AT, S
Name	FALK, BENJAMIN D.E.	Name	KELLEY, KIM
Address	500 S FLORIDA AVE SUITE 700	Address	500 S FLORIDA AVE SUITE 700
City-State-Zip:	LAKELAND FL 33801	City-State-Zip:	LAKELAND FL 33801

FALK, BENJAMIN D 500 S FLORIDA AVE SUITE 700 LAKELAND, FL 33801 US

Name and Address of Current Registered Agent:

# 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000085121

### Entity Name: PRIME STORAGE MANAGEMENT, INC.

### **Current Principal Place of Business:**

500 S FLORIDA AVE SUITE 700 LAKELAND. FL 33801

### **Current Mailing Address:**

500 S FLORIDA AVE SUITE 700 LAKELAND. FL 33801 US

#### FEI Number: 80-0857675

Certificate of Status Desired: Yes

04/19/2023 Date

04/19/2023

Date

# FILED Apr 19, 2023 Secretary of State 0298628401CC

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