## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000003167

Entity Name: PUBLIC STORAGE NORTH BAY VILLAGE, LLC

**FILED** Mar 09, 2016 **Secretary of State** CC9042882324

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

C/O PUBLIC STORAGE 701 WESTERN AVE. GLENDALE, CA 91201

## **Current Mailing Address:**

C/O PUBLIC STORAGE 701 WESTERN AVE. GLENDALE, CA 91201

FEI Number: 52-2142252 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD GLENDALE, FL 33324 US

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.

SIGNATURE:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title **MGRM** Title AUTHORIZED MEMBER

PS NORTH BAY VILLAGE INC. Name Name ADAMS, DREW

Address 701 WESTERN AVE. Address C/O PUBLIC STORAGE

701 WESTERN AVE.

GLENDALE CA 91201 City-State-Zip:

Title **AUTHORIZED MEMBER** Title **AUTHORIZED MEMBER** Name HUGHES, LILY YAN

KAO, JOHN Name Address

C/O PUBLIC STORAGE C/O PUBLIC STORAGE Address

701 WESTERN AVE. 701 WESTERN AVE.

City-State-Zip: GLENDALE CA 91201 GLENDALE CA 91201 City-State-Zip:

Title **AUTHORIZED MEMBER** 

ANDREWS, TODD Name

Address C/O PUBLIC STORAGE

701 WESTERN AVE.

GLENDALE CA 91201

GLENDALE CA 91201 City-State-Zip:

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

03/09/2016 SIGNATURE: DREW ADAMS **MEMBER**