## **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000010178

Entity Name: WAREHOUSE ANYWHERE, LLC

**Current Principal Place of Business:** 

LIFE STORAGE, LP 6467 MAIN STREET WILLIAMSVILLE, NY 14221

**Current Mailing Address:** 

LIFE STORAGE, LP 6467 MAIN STREET WILLIAMSVILLE, NY 14221 US

FEI Number: 81-0834328 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMSVILLE NY 14221

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, 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

**FILED** Apr 16, 2021

Secretary of State

7496268998CC

Authorized Person(s) Detail:

Title **CFO** Title **EXECUTIVE VICE PRESIDENT** 

GREGOIRE, ANDREW J. Name Name PATTERSON, MITCH Address LIFE STORAGE, LP Address LIFE STORAGE, LP 6467 MAIN STREET

6467 MAIN STREET

WILLIAMSVILLE NY 14221

WILLIAMSVILLE NY 14221 WILLIAMSVILLE NY 14221 City-State-Zip: City-State-Zip:

Title **EXECUTIVE VICE PRESIDENT** Title **PRESIDENT** 

CAUDILL, GLENN CIEMCIOCH, STEVEN Name Name

LIFE STORAGE, LP LIFE STORAGE, LP Address Address

6467 MAIN STREET 6467 MAIN STREET

Title CEO Title **MANAGER** 

KILLEEN, EDWARD F. Name Name PATTERSON, MITCH LIFE STORAGE, LP LIFE STORAGE, LP Address Address

6467 MAIN STREET 6467 MAIN STREET

WILLIAMSVILLE NY 14221 WILLIAMSVILLE NY 14221 City-State-Zip: City-State-Zip:

Title **MANAGER** Title **MANAGER** 

Name CAUDILL, GLENN Name KILLEEN, EDWARD F. LIFE STORAGE, LP LIFE STORAGE, LP Address Address 6467 MAIN STREET 6467 MAIN STREET

WILLIAMSVILLE NY 14221 City-State-Zip: WILLIAMSVILLE NY 14221 City-State-Zip:

## Continues on page 2

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.

04/16/2021 SIGNATURE: ANDREW J. GREGOIRE MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

Date

## **Authorized Person(s) Detail Continued:**

Title MANAGER

Name GREGOIRE, ANDREW J.

Address

LIFE STORAGE, LP

6467 MAIN STREET

City-State-Zip: WILLIAMSVILLE NY 14221

Title SECRETARY

Name HWANG, SYLVIA

Address LIFE STORAGE, LP

6467 MAIN STREET

City-State-Zip: WILLIAMSVILLE NY 14221

Title MANAGER

Name SAFFIRE, JOSEPH V.

Address LIFE STORAGE, LP

6467 MAIN STREET

City-State-Zip: WILLIAMSVILLE NY 14221