

SCC eFile

**2016 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

216520225

1.) CORPORATION NAME:

U-STORE MANAGEMENT CORPORATION

DUE DATE: **5/31/2016**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER, 16TH FLOOR
1111 EAST MAIN STREET**

SCC ID NO: **01951425**

RICHMOND, VA

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 100 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1611 NORTH KENT STREET SUITE 800

CITY/ST/ZIP: ARLINGTON, VA 22209

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

| | | |
|---|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: RICHARD L SELLERS | | |
| TITLE: PRESIDENT | | |
| ADDRESS: 1611 NORTH KENT STREET SUITE 800 | | |
| CITY/ST/ZIP/CO: ARLINGTON, VA 22209 | | |

| | | |
|---|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: BERNARD FENSTERWALD III | | |
| TITLE: VICE PRESIDENT | | |
| ADDRESS: 1611 NORTH KENT STREET SUITE 800 | | |
| CITY/ST/ZIP/CO: ARLINGTON, VA 22209 | | |

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|---|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: PATRICIA FENSTERWALD | | |
| TITLE: TREASURER | | |
| ADDRESS: 1611 NORTH KENT STREET SUITE 800 | | |
| CITY/ST/ZIP/CO: ARLINGTON, VA 22209 | | |

| | | |
|---|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: HELEN SELLERS | | |
| TITLE: SECRETARY | | |
| ADDRESS: 1611 NORTH KENT STREET SUITE 800 | | |
| CITY/ST/ZIP/CO: ARLINGTON, VA 22209 | | |

| | | |
|---|----------------------------------|--|
| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: DANIEL ADLER | | |
| TITLE: DIRECTOR | | |
| ADDRESS: 1611 NORTH KENT STREET SUITE 800 | | |
| CITY/ST/ZIP/CO: ARLINGTON, VA 22209 | | |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

| | | |
|---|----------------------------------|-----------|
| /s/ RICHARD L SELLERS | RICHARD L SELLERS, PRESIDENT | 5/28/2016 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.