

<b>SCC eFile</b>	<b>2016 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	216501681				
1.) CORPORATION NAME: <b>Mast-Lepley Storage Structures, Inc.</b>		DUE DATE: <b>2/29/2016</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>REGISTERED AGENT SOLUTIONS, INC. 7288 HANOVER GREEN DRIVE MECHANICSVILLE, VA</b>		SCC ID NO: <b>F1461641</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>HANOVER COUNTY</b>		5.) STOCK INFORMATION				
4.) STATE OR COUNTRY OF INCORPORATION: <b>OH</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>850</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	850
CLASS	AUTHORIZED					
COMMON	850					
6.) PRINCIPAL OFFICE ADDRESS:						
ADDRESS: 1088 N APPLE CREEK RD CITY/ST/ZIP: WOOSTER, OH 44691						
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.						
NAME: ALVIN HORST	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
TITLE: PRESIDENT						
ADDRESS: 1088 N APPLE CREEK RD						
CITY/ST/ZIP/CO: WOOSTER, OH 44691						
NAME: CAROL S HORST	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR				
TITLE: S/T						
ADDRESS: 1088 N APPLE CREEK RD						
CITY/ST/ZIP/CO: WOOSTER, OH 44691						
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/ ALVIN HORST	ALVIN HORST, PRESIDENT	1/6/2016				
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.						