

**2016 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F00000001033

**Entity Name:** MOBILE MINI, INC.**Current Principal Place of Business:**4646 EAST VAN BUREN STREET  
SUITE 400  
PHOENIX, AZ 85008**Current Mailing Address:**4646 EAST VAN BUREN STREET  
SUITE 400  
PHOENIX, AZ 85008 US**FEI Number:** 86-0748362**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRESIDENT, CEO  
Name OLSSON, ERIK  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title SECRETARY, GENERAL COUNSEL  
Name MINER, CHRISTOPHER  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title CFO  
Name FUNK, MARK  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title DIRECTOR  
Name MARTELL, JAMES  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title DIRECTOR - TAX  
Name CRABTREE, MICHAEL  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title CHAIRMAN  
Name WATTS, MICHAEL L.  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title DIRECTOR  
Name MCNAMEE, FREDERICK  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title DIRECTOR  
Name GOBLE, JEFFREY S.  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

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*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: MICHAEL CRABTREE****DIRECTOR****05/31/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name TRACHTENBERG, LARRY  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title DIRECTOR  
Name MCCONNELL, STEVEN A.  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title DIRECTOR  
Name OLSSON, ERIK  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title DIRECTOR  
Name SWANI, SANJAY  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008

Title CHIEF ACCOUNTING OFFICER  
Name TAYLOR, AUDRA  
Address 4646 EAST VAN BUREN STREET  
SUITE 400  
City-State-Zip: PHOENIX AZ 85008