

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P35278

Entity Name: AMERCO REAL ESTATE COMPANY**Current Principal Place of Business:**2721 N. CENTRAL AVENUE
PHOENIX, AZ 85004**Current Mailing Address:**2721 N. CENTRAL AVENUE
PHOENIX, AZ 85004**FEI Number:** 88-0210399**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name SHOEN, EDWARD J
Address 2727 N. CENTRAL AVE
City-State-Zip: PHOENIX AZ 85004

Title PD
Name VIZCARRA, CARLOS
Address 2727 N CENTRAL AVE
City-State-Zip: PHOENIX AZ 85004

Title AS
Name WINKELMAN, STEPHEN R
Address 2721 N. CENTRAL AVE
City-State-Zip: PHOENIX AZ 85004

Title DIRECTOR
Name BERG, JASON A
Address 2721 N. CENTRAL AVENUE
City-State-Zip: PHOENIX AZ 85004

Title D
Name DODDS, JOHN M
Address 2727 N. CENTRAL AVENUE
City-State-Zip: PHOENIX AZ 85004

Title S
Name SETTLES, JENNIFER M
Address 2721 N. CENTRAL AVENUE
City-State-Zip: PHOENIX AZ 85004

Title DIRECTOR
Name HERRERA, RICHARD J.
Address 2721 N. CENTRAL AVENUE
City-State-Zip: PHOENIX AZ 85004

Title DIRECTOR
Name SHOEN, SAMUEL J
Address 2721 N. CENTRAL AVENUE
City-State-Zip: PHOENIX AZ 85004

Continues on page 2

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: JENNIFER M. SETTLES**SECRETARY****03/31/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MULLEN, DANIEL R
Address 2721 N. CENTRAL AVENUE
City-State-Zip: PHOENIX AZ 85004

Title ASSISTANT TREASURER
Name BRIDGEMAN, TOBIAS C.
Address 5555 KIETZKE LN.
SUITE 100
City-State-Zip: RENO NV 89511

Title ASSISTANT SECRETARY
Name AVRAHAM, RAPHAEL J.
Address 2721 N. CENTRAL AVENUE
City-State-Zip: PHOENIX AZ 85004

Title ASSISTANT TREASURER
Name HARTE, KEVIN J.
Address 5555 KIETZKE LN.
SUITE 100
City-State-Zip: RENO NV 89511