

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

21212.1344--7/18/2012

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212121344

1. CORPORATION NAME:
 GREAT AMERICAN VAN & STORAGE, INC.
2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: DIR.
 DONALD MENSCH

DUE DATE: 06/30/12
 SCC ID NO.: 0062946-9

6218-20B OLD FRANCONIA RD

ALEXANDRIA, VA 22310-3402

3. CITY OR COUNTY OF VA REGISTERED OFFICE:
 129-FAIRFAX COUNTY

4. STATE OR COUNTRY OF INCORPORATION:
 VA-VIRGINIA

5. STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	250

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE. Carefully read the enclosed instructions. Type or print in black only.

6. PRINCIPAL OFFICE ADDRESS:

<input checked="" type="checkbox"/> Mark this box if address shown below is correct	If the block to the left is blank or contains incorrect data please add or correct the address below.
ADDRESS: 6218-B OLD FRANCONIA ROAD CITY/ST/ZIP ALEXANDRIA, VA 22310	ADDRESS: CITY/ST/ZIP

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.

Mark appropriate box unless area below is blank: <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement
OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME: JACK KAGAN TITLE: PRESIDENT ADDRESS: 6218-B OLD FRANCONIA ROAD CITY/ST/ZIP: ALEXANDRIA, VA 22310	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME: TITLE: ADDRESS: CITY/ST/ZIP:

I affirm that the information contained in this report is accurate and complete as of the date below.

SIGNATURE OF DIRECTOR/OFFICER
 LISTED IN THIS REPORT

DORA A. HAWKINS
 PRINTED NAME AND CORPORATE TITLE

7/16/2012
 DATE

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

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CORPORATION NAME:
GREAT AMERICAN VAN & STORAGE, INC.

DUE DATE: 06/30/12
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7. DIRECTORS AND PRINCIPAL OFFICERS (continued):

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OFFICER <input checked="" type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME: DORA A HAWKINS TITLE: S/T ADDRESS: 2321 DUNKIRK DRIVE CITY/ST/ZIP: OWINGS, MD 20736	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME: TITLE: ADDRESS: CITY/ST/ZIP:
Mark appropriate box unless area below is blank: <input checked="" type="checkbox"/> Information is correct <input type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement
OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME: DONALD MENSCH TITLE: DIRECTOR ADDRESS: 3892 UNIVERSITY DRIVE CITY/ST/ZIP: FAIRFAX, VA 22030	OFFICER <input type="checkbox"/> DIRECTOR <input type="checkbox"/> NAME: TITLE: ADDRESS: CITY/ST/ZIP:
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