

SCC eFile

**2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

213529431

1.) CORPORATION NAME:

GHT Limited

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **01387802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1010 N GLEBE ROAD #200

CITY/ST/ZIP: ARLINGTON, VA 22201-4749

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: PAUL C O'BRIEN
 TITLE: P/COB
 ADDRESS: 8312 KAY COURT
 CITY/ST/ZIP/CO: ANNANDALE, VA 22003

OFFICER

DIRECTOR

NAME: CRAIG C EICHENLAUB
 TITLE: VICE PRESIDENT
 ADDRESS: 14253 HART FOREST DRIVE
 CITY/ST/ZIP/CO: CENTREVILLE, VA 22020

OFFICER

DIRECTOR

NAME: MATTHEW P. JACOBS
 TITLE: VICE PRESIDENT
 ADDRESS: 1920 MIRACLE LANE
 CITY/ST/ZIP/CO: FALLS CHURCH, VA 22043

OFFICER

DIRECTOR

NAME: JOHN C MCGEE
 TITLE: VICE PRESIDENT
 ADDRESS: 100 BAY DRIVE
 CITY/ST/ZIP/CO: STEVENSVILLE, MD 21666-2922

OFFICER

DIRECTOR

NAME: ROBERT M. MENUET
 TITLE: VICE PRESIDENT
 ADDRESS: PO BOX 176
 CITY/ST/ZIP/CO: ORLEAN, VA 20128

OFFICER

DIRECTOR

NAME: SANDRA B WIYGUL
 TITLE: CFO/TREASURER
 ADDRESS: 9510 SPODE CT
 CITY/ST/ZIP/CO: FAIRFAX, VA 22032

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM N. GERKE, JR. SECRETARY 4905 APPLE TREE DRIVE ALEXANDRIA, VA 22310	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Patrick A. Kunze VICE PRESIDENT 520 N Oakland St Arlington, VA 22203	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	John D. Wozney VICE PRESIDENT 13711 Oakland Ridge Road Haymarket, VA 20169	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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/ PAUL C O'BRIEN	PAUL C O'BRIEN, P/COB	6/24/2013			
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.					