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|--|---|-------|------------|--------|--------|
| 1.) CORPORATION NAME:<br><b>CASALS &amp; ASSOCIATES, INC.</b><br>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:<br><b>CT CORPORATION SYSTEM<br/>         4701 COX ROAD, SUITE 285<br/>         GLEN ALLEN, VA</b><br>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:<br><b>HENRICO COUNTY</b><br>4.) STATE OR COUNTRY OF INCORPORATION:<br><b>VA</b> | DUE DATE: <b>5/31/2014</b><br>SCC ID NO: <b>03408994</b><br>5.) STOCK INFORMATION<br><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>25,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 25,000 |
| CLASS  | AUTHORIZED  |       |            |        |        |
| COMMON   | 25,000  |       |            |        |        |

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| 6.) PRINCIPAL OFFICE ADDRESS:<br><br>ADDRESS: 1700 Old Meadow Road<br><br>CITY/ST/ZIP: McLean, VA 22102 |
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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.

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|---|---|--|
| NAME: STEVEN F GAFFNEY<br>TITLE: DIR/PRES<br>ADDRESS: 1700 Old Meadow Road<br>CITY/ST/ZIP/CO: McLean, VA 22102      | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: RONALD A HARVOT JR<br>TITLE: VP/TAXES<br>ADDRESS: 13601 N FREEWAY<br>CITY/ST/ZIP/CO: FORT WORTH, TX 76177     | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR            |
| NAME: WILLIAM T KANSKY<br>TITLE: DIR/CFO/TREAS<br>ADDRESS: 1700 Old Meadow Road<br>CITY/ST/ZIP/CO: McLean, VA 22102 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: ELVIRA M FRENCH<br>TITLE: ASST SECRETARY<br>ADDRESS: 1700 Old Meadow Road<br>CITY/ST/ZIP/CO: McLean, VA 22102 | <input checked="" type="checkbox"/> OFFICER | <input 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/ ELVIRA M FRENCH                                 | ELVIRA M FRENCH, ASST SECRETARY  | 5/27/2014 |
| 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.