

1.) CORPORATION NAME:

UTILX CORPORATION

DUE DATE: **6/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS, INC.
4701 COX ROAD
SUITE 301**

SCC ID NO: **F0512402**

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 22820 RUSSELL ROAD

CITY/ST/ZIP: KENT, WA 98032

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:	JACOB H STEL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	22820 RUSSELL ROAD		
CITY/ST/ZIP/CO:	KENT, WA 98032		

NAME:	GUS DEREZES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	22820 RUSSELL ROAD		
CITY/ST/ZIP/CO:	KENT, WA 98032		

NAME:	JASON FRENCH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP-FINANCE		
ADDRESS:	22820 RUSSELL ROAD		
CITY/ST/ZIP/CO:	KENT, VA 98032		

NAME:	KRIS RUBINO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3580 PROGRESS DR		
CITY/ST/ZIP/CO:	BENSALCM, PA 19020		

NAME:	LORI PINDER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	4400 POST OAK PARKWAY SUITE 1000		
CITY/ST/ZIP/CO:	HOUSTON, TX 77027		

NAME:	RICHARD W RUSSLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	4400 POST OAK PARKWAY STE 1000		
CITY/ST/ZIP/CO:	HOUSTON, TX 77027		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL GIARRATANO DIRECTOR 100 MARCUS BLVD STE 1 HAUPPAUGE, NY 11788	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES GIBSON DIRECTOR 4400 POST OAK PARKWAY STE 1000 HOUSTON, TX 77027	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM MCDUGALL DIRECTOR 5631 STEUBENVILLE PIKE MCKEES ROCK, PA 15136	<input 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/ LORI PINDER	LORI PINDER, SECRETARY	7/23/2012	
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.			