

SCC eFile

**2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

214542383

1.) CORPORATION NAME:

CUBIC APPLICATIONS, INC.

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**INCORP SERVICES, INC.
7288 HANOVER GREEN DRIVE
MECHANICSVILLE, VA**

SCC ID NO: **F1178534**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 400 UNION AVENUE SE
SUITE 300

CITY/ST/ZIP: OLYMPIA, WA 98501

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JIMMIE L BALENTINE	
TITLE:	PRES/CEO/DIR	
ADDRESS:	400 UNION AVE. S.E. SUITE 300	
CITY/ST/ZIP/CO:	OLYMPIA, WA 98501	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN D THOMAS	
TITLE:	VP, FINANCE	
ADDRESS:	9333 BALBOA AVENUE	
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92123	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JULIE M. MALOY	
TITLE:	VP, TAX	
ADDRESS:	9333 BALBOA AVENUE	
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92123	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RUTH VAN SICKLE	
TITLE:	EX VP	
ADDRESS:	4550 THIRD AVE SE	
CITY/ST/ZIP/CO:	LACEY, WA 98503-1053	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	GREGORY L TANNER	
TITLE:	T/AS	
ADDRESS:	9333 BALBOA AVENUE	
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92123	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JAMES R. EDWARDS	
TITLE:	SECRETARY	
ADDRESS:	9333 BALBOA AVENUE	
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92123	

NAME: ANGELA L. HARTLEY TITLE: ASST SECRETARY ADDRESS: 9333 BALBOA AVENUE CITY/ST/ZIP/CO: SAN DIEGO, CA 92123	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: BRADLEY H. FELDMANN TITLE: DIRECTOR ADDRESS: 9333 BALBOA AVENUE CITY/ST/ZIP/CO: SAN DIEGO, CA 92123	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ ANGELA L. HARTLEY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ANGELA L. HARTLEY, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	9/9/2014 DATE
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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.