

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214525744

1.) CORPORATION NAME:

Thales Transport & Security, Inc.

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1551730**

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: 5700 Corporate Drive
Suite 750

CITY/ST/ZIP: Pittsburgh, PA 15237

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: | John Brohm | |
| TITLE: | President/CEO | |
| ADDRESS: | 5700 Corporate Drive Suite 750 | |
| CITY/ST/ZIP/CO: | Pittsburgh, PA 15237 | |

| | | |
|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | Debra Lhota | |
| TITLE: | Treasurer/CFO | |
| ADDRESS: | 5700 Corporate Drive Suite 750 | |
| CITY/ST/ZIP/CO: | Pittsburgh, PA 15237 | |

| | | |
|-----------------|---|--|
| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | Duncan Lewis | |
| TITLE: | COO | |
| ADDRESS: | 5700 Corporate Drive Suite 750 | |
| CITY/ST/ZIP/CO: | Pittsburgh, PA 15237 | |

| | | |
|-----------------|---|-----------------------------------|
| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | Alex Woods | |
| TITLE: | SECRETARY | |
| ADDRESS: | 5700 Corporate Drive Suite 750 | |
| CITY/ST/ZIP/CO: | Pittsburgh, PA 15237 | |

| | | |
|-----------------|-----------------------------------|--|
| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | Alan Pellegrini | |
| TITLE: | DIRECTOR | |
| ADDRESS: | 5700 Corporate Drive Suite 750 | |
| CITY/ST/ZIP/CO: | Pittsburgh, PA 15237 | |

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/ Alex Woods | Alex Woods, SECRETARY | 5/17/2014 |
| 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. | | |