

1.) CORPORATION NAME:

**CU Direct Corporation**

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
Bank of America Center, 16th Floor  
1111 East Main Street**

SCC ID NO: **F1600818**

**RICHMOND, VA 23219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NV**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2855 E GUASTI ROAD  
STE 500

CITY/ST/ZIP: ONTARIO, CA 91761

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:	ANTHONY BOUTELLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	2855 E GUASTI ROAD		
	STE 500		
CITY/ST/ZIP/CO:	ONTARIO, CA 91761		

NAME:	KIP HAAS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	2855 E GUASTI ROAD		
	STE 500		
CITY/ST/ZIP/CO:	ONTARIO, CA 91761		

NAME:	CRAIG MONTESANTI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP/CFO		
ADDRESS:	2855 E GUASTI ROAD		
	STE 500		
CITY/ST/ZIP/CO:	ONTARIO, CA 91761		

NAME:	JERALD NEEMANN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CSO		
ADDRESS:	2855 E GUASTI ROAD		
	STE 500		
CITY/ST/ZIP/CO:	ONTARIO, CA 91761		

NAME:	JOHN LUND	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE CHAIRMAN		
ADDRESS:	1344 WEST 4675 SOUTH		
CITY/ST/ZIP/CO:	RIVERDALE, UT 84405		

NAME: JOE BRANCUCCI TITLE: CHAIRMAN ADDRESS: 711 E. HENDERSON AVE. CITY/ST/ZIP/CO: TAMPA, FL 33672	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DIANA DYKSTRA TITLE: DIRECTOR ADDRESS: 2855 E. GUASTI RD., STE. 600 CITY/ST/ZIP/CO: ONTARIO, CA 91761	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BARRY JOLETTE TITLE: DIRECTOR ADDRESS: 350 CONVENTION WAY CITY/ST/ZIP/CO: REDWOOD CITY, CA 94063	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JEFF MARCH TITLE: DIRECTOR ADDRESS: 520 EAGLEVIEW BLVD. CITY/ST/ZIP/CO: EXTON, PA 19341	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVE REYNOLDS TITLE: DIRECTOR ADDRESS: 16211 LA CANTERA PKWY CITY/ST/ZIP/CO: SAN ANTONIO, TX 78256	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LARRY WILSON TITLE: DIRECTOR ADDRESS: 1000 ST. ALBANS DR. CITY/ST/ZIP/CO: RALEIGH, NC 27609	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DONNA BLAND TITLE: DIRECTOR ADDRESS: 8945 CAL CENTER DRIVE CITY/ST/ZIP/CO: SACRAMENTO, CA 95826	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: STERLING NIELSEN TITLE: DIRECTOR ADDRESS: 7181 S. CAMPUS VIEW DRIVE CITY/ST/ZIP/CO: WEST JORDAN, UT 84084	<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/ CRAIG MONTESANTI	CRAIG MONTESANTI, SVP/CFO	7/30/2012
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.