

1.) CORPORATION NAME:

Vista Applied Technologies Group, Inc.

DUE DATE: **1/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**PHILLIP A FOX
2231 CRYSTAL DR STE 815
ARLINGTON, VA**

SCC ID NO: **F1654732**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1600 FOWLER STREET

CITY/ST/ZIP: RICHLAND, WA 99352

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:	DOUGLAS M OORD	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1600 FOWLER STREET		
CITY/ST/ZIP/CO:	RICHLAND, WA 99352		
NAME:	PHILLIP A FOX	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	2231 CRYSTAL DRIVE		
CITY/ST/ZIP/CO:	STE 515 ARLINGTON, VA 22202		
NAME:	JOSEPH MARESCA JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	528 E WEDDELL DR		
CITY/ST/ZIP/CO:	SUITE 1 & 2 SUNNYVALE, CA 94089		
NAME:	JERRY ROSENBLUM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	2475 HANOVER ST		
CITY/ST/ZIP/CO:	PALO ALTO, CA 94304-1114		
NAME:	JAMES GALLAGHER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1903 EAGLE RIDGE DR		
CITY/ST/ZIP/CO:	MONROEVILLE, PA 15146		
NAME:	HAROLD GUTHART	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	528 E WEDDELL DR		
CITY/ST/ZIP/CO:	SUITES 1 & 2 SUNNYVALE, CA 94089		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ARTHUR H HAUSMAN DIRECTOR 528 E WEDDELL DR SUITES 1 & 2 SUNNYVALE, CA 94089	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN B HOLLYER DIRECTOR 45372 CAPPS COURT CALIFORNIA, MD 20619	<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/ DOUGLAS M OORD	DOUGLAS M OORD, TREASURER	3/22/2013	
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.			