

1.) CORPORATION NAME:

**Bechtel Development Company, Inc.**

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1889726**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12011 SUNSET HILLS ROAD

CITY/ST/ZIP: RESTON, VA 20190

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 type="checkbox"/> DIRECTOR
NAME:	ALAN MAWDSLEY	
TITLE:	PRESIDENT	
ADDRESS:	5275 WESTVIEW DR	
CITY/ST/ZIP/CO:	FREDERICK, MD 21703	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	PETER ARNONE	
TITLE:	VP & ASST TREAS	
ADDRESS:	50 BEALE ST	
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOHN MALARKEY	
TITLE:	VICE PRESIDENT	
ADDRESS:	12011 SUNSET HILLS ROAD	
CITY/ST/ZIP/CO:	RESTON, VA 20190	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ERIC PARKER	
TITLE:	PRINCIPAL VP	
ADDRESS:	50 BEALE ST	
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JEFFREY ROEHL	
TITLE:	VP/SECRETARY	
ADDRESS:	5275 WESTVIEW DR	
CITY/ST/ZIP/CO:	FREDERICK, MD 21703	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DAVID BLAISDELL	
TITLE:	VICE PRESIDENT	
ADDRESS:	12011 SUNSET HILLS ROAD	
CITY/ST/ZIP/CO:	RESTON, VA 20190	

NAME:	JEFFREY BLEE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	SPRAGUE COOK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	540 WICKHAM STREET		
CITY/ST/ZIP/CO:	BRISBANE, 4006, AU		
NAME:	JOSEPH FEYDER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5275 WESTVIEW DRIVE		
CITY/ST/ZIP/CO:	FREDERICK, MD 21703		
NAME:	PAUL JONES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	KEREM KUSI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11 PILGRIM STREET		
CITY/ST/ZIP/CO:	LONDON, EC4V 6RN, GB		
NAME:	RALPH ZIMMERMANN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	KEVIN LEADER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	ANNA LIU	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	KRISTIN MEIKLE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	12011 SUNSET HILLS ROAD		
CITY/ST/ZIP/CO:	RESTON, VA 20190		

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.

<u>/s/ PETER ARNONE</u>	<u>PETER ARNONE, VP &amp; ASST</u>	<u>3/8/2013</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TREAS 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.