

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003492

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** CUBIC APPLICATIONS, INC.

**Current Principal Place of Business:**

4550 THIRD AVENUE SE  
LACEY, WA 98503

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 85587  
SAN DIEGO, CA 92186

**New Mailing Address:**

**FEI Number:** 33-0607446      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PCED  
Name: BALENTINE, JIMMIE L  
Address: 4550 THIRD AVE SE  
City-St-Zip: LACEY, WA 98503

Title: EV  
Name: VAN SICKLE, RUTH P  
Address: 4550 THIRD AVENUE, SE  
City-St-Zip: LACEY, WA 98503

Title: S  
Name: HOESE, WILLIAM L  
Address: 9333 BALBOA AVENUE  
City-St-Zip: SAN DIEGO, CA 92123

Title: TAS  
Name: TANNER, GREGORY L  
Address: 9333 BALBOA AVENUE  
City-St-Zip: SAN DIEGO, CA 92123

Title: AT  
Name: PETERSON, ALLAN R  
Address: 9333 BALBOA AVENUE  
City-St-Zip: SAN DIEGO, CA 92123

Title: CONT  
Name: HARRISON, MARK A  
Address: 9333 BALBOA AVENUE  
City-St-Zip: SAN DIEGO, CA 92123

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALLAN R PETERSEN

AT

04/25/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date