

**2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000003780

**FILED**  
**Jan 08, 2013**  
**Secretary of State**  
**CC7015906756**

**Entity Name:** UNIVERSITIES SPACE RESEARCH ASSOCIATION - CORPORATION

**Current Principal Place of Business:**

10211 WINCOPIN CIRCLE  
SUITE 500  
COLUMBIA, MD 21044

**Current Mailing Address:**

10211 WINCOPIN CIRCLE  
SUITE 500  
COLUMBIA, MD 21044

**FEI Number: 52-0892064**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

*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

**Officer/Director Detail :**

Title DR.  
Name TARANTINO, FREDERICK A  
Address 10211 WINCOPIN CIR., SUITE 500  
City-State-Zip: COLUMBIA MD 21044

Title S  
Name BENSON, STEVEN PESQ.  
Address 1025 CONNECTICUT AVE., NW, SUITE 400  
City-State-Zip: WASHINGTON DC 20006

Title CFO  
Name HILSER, KARIN PHD  
Address 10211 WINCOPIN CIR., SUITE 500  
City-State-Zip: COLUMBIA MD 21044

Title DR  
Name PROOYEN, JAN VAN  
Address 10211 WINCOPIN CIR., SUITE 500  
City-State-Zip: COLUMBIA MD 21044

Title DR  
Name FIX, JOHN  
Address 10211 WINCOPIN CIR., SUITE 500  
City-State-Zip: COLUMBIA MD 21044

Title DR  
Name COVERSTONE, VICTORIA  
Address 10211 WINCOPIN CIR., SUITE 500  
City-State-Zip: COLUMBIA MD 21044

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: KARIN HILSER**

**CHIEF FINANCIAL OFFICER**

**01/08/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date