


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90235 028 ***150.00

DOCUMENT # F99000003492	
1. Entity Name CUBIC APPLICATIONS, INC.	

Principal Place of Business 9333 BALBOA AVE. SAN DIEGO, CA 92123	Mailing Address 9333 BALBOA AVE. MS 10-31 SAN DIEGO, CA 92123
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	Country
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40096347



04232008 Chg-P CR2E034 (12/06)

4. FEI Number 33-0607446	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____


FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO BALENTINE, JIMMIE L 4550 THIRD AVE SE LACEY, WA 985031053 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/CEO/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VAN SICKLE, RUTH P 4550 THIRD AVENUE, S.E. LACEY, WA 985031053 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BRISTOW, RICHARD D ONE ENTERPRISE PKWY, STE 100 HAMPTON VA 23666 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GC KOPF, KENNETH A 9333 BALBOA AVENUE SAN DIEGO, CA 92123 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHERRIE, STANLEY F 426 DELAWARE ST, STE C-3 LEAVENWORTH KS 66048 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T THOMAS, JOHN D 9333 BALBOA AVENUE SAN DIEGO, CA 92123 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT PETERSON, ALLAN R 9333 BALBOA AVENUE SAN DIEGO, CA 92123 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAVID, WILLIAM BLDG 1429 11TH ST FORT POLK LA 71459 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CONT HARRISON, MARK A 9333 BALBOA AVENUE SAN DIEGO, CA 92123 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/GC/D HOBSE, WILLIAM L 9333 BALBOA AVE SAN DIEGO CA 92123 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **ALLAN R. PETERSEN** 4-24-08 (858) 505-2420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

DOCUMENT # F99000003492				ATTACHMENT	
1. Entity Name CUBIC APPLICATIONS, INC.					
Principal Place of Business 9333 BALBOA AVE. SAN DIEGO, CA 92123		Mailing Address 9333 BALBOA AVE. MS 10-31 SAN DIEGO, CA 92123			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 33-0607446	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO BALENTINE, JIMMIE L 4550 THIRD AVE SE LACEY, WA 985031053	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARSH, CARYL G 470 ARMOUR DR NE ATLANTA GA 30324	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VAN SICKLE, RUTH P 4550 THIRD AVENUE, S.E. LACEY, WA 985031053	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NEASHAM, JOND 5645 KING CENTRE DR, STE 300 KINGSTOWN VA 22315	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GC KOPF, KENNETH A 9333 BALBOA AVENUE SAN DIEGO, CA 92123	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SARGEANT, ALAN D LIBERTY STATION BLDG 901, 2880 HISTORIC DECATUR RD, STE 200 SAN DIEGO CA 92106	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T THOMAS, JOHN D 9333 BALBOA AVENUE SAN DIEGO, CA 92123	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHMADER, JOHN 426 DELAWARE ST, STE C-3 LEAVENWORTH KS 66048	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT PETERSON, ALLAN R 9333 BALBOA AVENUE SAN DIEGO, CA 92123	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH LARRY 5645 KING CENTRE DR, STE 201 KINGSTOWN VA 22315	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CONT HARRISON, MARK A 9333 BALBOA AVENUE SAN DIEGO, CA 92123	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/AS TANNER, GREGORY L 9333 BALBOA AVE SAN DIEGO CA 92123	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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SIGNATURE: _____ (CONTINUATION) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date _____ Daytime Phone # _____					

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SAN DIEGO, CA 92123

Mailing Address
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MS 10-31
SAN DIEGO, CA 92123

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04232008

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

33-0607446

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
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PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! - FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCEO ☐ Delete
NAME BALENTINE, JIMMIE L
STREET ADDRESS 4550 THIRD AVE SE
CITY-ST-ZIP LACEY, WA 985031053

TITLE D ☐ Change ☒ Addition
NAME BOYLE, WILLIAM W
STREET ADDRESS 9333 BALBOA AVE
CITY-ST-ZIP SAN DIEGO CA 92123

TITLE V ☐ Delete
NAME VAN SICKLE, RUTH P
STREET ADDRESS 4550 THIRD AVENUE, S.E.
CITY-ST-ZIP LACEY, WA 985031053

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE GC ☐ Delete
NAME KOPF, KENNETH A
STREET ADDRESS 9333 BALBOA AVENUE
CITY-ST-ZIP SAN DIEGO, CA 92123

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME THOMAS, JOHN D
STREET ADDRESS 9333 BALBOA AVENUE
CITY-ST-ZIP SAN DIEGO, CA 92123

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AT ☐ Delete
NAME PETERSON, ALLAN R
STREET ADDRESS 9333 BALBOA AVENUE
CITY-ST-ZIP SAN DIEGO, CA 92123

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE .CONT ☐ Delete
NAME HARRISON, MARK A
STREET ADDRESS 9333 BALBOA AVENUE
CITY-ST-ZIP SAN DIEGO, CA 92123

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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(CONTINUATION)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #