

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000003069

**Entity Name:** DIGITALGLOBE, INC.

**Current Principal Place of Business:**

1601 DRY CREEK DRIVE, SUITE 260  
LONGMONT, CO 80503

**Current Mailing Address:**

1601 DRY CREEK DRIVE, SUITE 260  
LONGMONT, CO 80503

**FEI Number:** 31-1420852

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           CEOD  
Name           TARR, JEFFREY  
Address        1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title           CFO  
Name           FERRERA, GARY W  
Address        1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title           SEC  
Name           JABLONSKY, DANIEL  
Address        1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title           DIRECTOR  
Name           DECYK, ROXANNE J  
Address        1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title           DIRECTOR  
Name           CYPRUS, NICK  
Address        1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title           DIRECTOR  
Name           ESTES, HOWELL  
Address        1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title           DIRECTOR  
Name           FAGA, MARTIN  
Address        1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title           DIRECTOR  
Name           HOUGH, LAWRENCE  
Address        1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

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*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:** DANIEL L. JABLONSKY

**SECRETARY**

**04/09/2015**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name JENSON, WARREN  
Address 1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title DIRECTOR  
Name WHITEHURST, JAMES  
Address 1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title DIRECTOR  
Name TILL, KIMBERLY  
Address 1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503

Title DIRECTOR  
Name ZERVIGON, EDDY  
Address 1601 DRY CREEK DRIVE, SUITE 260  
City-State-Zip: LONGMONT CO 80503