

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000003543

**FILED**  
**Mar 30, 2015**  
**Secretary of State**  
**CC2950247028**

**Entity Name:** SPACE TIME INSIGHT, INC.

**Current Principal Place of Business:**

1850 GATEWAY DRIVE, SUITE 125  
SAN MATEO, CA 94404

**Current Mailing Address:**

1850 GATEWAY DRIVE, SUITE 125  
SAN MATEO, CA 94404 US

**FEI Number:** 56-2320897

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
515 EAST 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:** STANLEY HUSER

03/30/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name COGAN, GIL  
Address 2730 SAND HILL ROAD, SUITE 150  
City-State-Zip: MENLO PARK CA 94025

Title D  
Name GILL, JASVIR  
Address 45680 NORTHPORT LOOP EAST  
City-State-Zip: FREMONT CA 94538

Title D  
Name KINGSLEY, BILL  
Address BLDG D SUITE 105, 625 W. RIDGE PIKE  
City-State-Zip: CONSHOHOCKEN PA 19428

Title D  
Name AARES, MARTIN  
Address 201 NORTH UNION STREET, SUITE 350  
City-State-Zip: ALEXANDRIA VA 22314

Title CFO  
Name TAMBLYN, WILLIAM J.  
Address 1850 GATEWAY DRIVE, SUITE 125  
City-State-Zip: SAN MATEO CA 94404

Title CEO & DIRECTOR  
Name SCHILLING, ROBERT  
Address 1850 GATEWAY DRIVE, SUITE 125  
City-State-Zip: SAN MATEO CA 94404

Title DIRECTOR  
Name HUFF, JAMES H  
Address 700 UNIVERSE BOULEVARD  
City-State-Zip: JUNO BEACH FL 33408

Title DIRECTOR  
Name FOX, ANTHONY  
Address ONE FULLERTON, LEVEL 02=01  
1 FULLERTON ROAD  
City-State-Zip: SINGAPORE 049213

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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:** WILLIAM J. TAMBLYN

CFO

03/30/2015

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           LUONGO, JOHN  
Address        1080 PARROTT DRIVE  
City-State-Zip: HILLSBOROUGH CA 94010