

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000003834

Entity Name: OCTAGON, INC.

**Current Principal Place of Business:**

1751 PINNACLE DRIVE  
STE 1500  
MC LEAN, VA 22102

**Current Mailing Address:**

1751 PINNACLE DRIVE  
STE 1500  
MC LEAN, VA 22102

FEI Number: 52-1287224

Certificate of Status Desired: No

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

CAPITOL CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DRIVE  
SUITE A  
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 D  
Name DUDLEY, RICK  
Address 800 CONNECTICUT AVENUE  
City-State-Zip: NORWALK CT 06854

Title P D  
Name DE PICCIOTTO, PHILIP  
Address 1751 PINNACLE DR., STE. 1500  
City-State-Zip: MCLEAN VA 22102

Title VP T  
Name JOHNSON, ELLEN T  
Address 1114 AVENUE OF THE AMERICAS,  
18TH FLOOR  
City-State-Zip: NEW YORK NY 10036

Title VP S  
Name BONZANI, ANDREW  
Address 1114 AVENUE OF THE AMERICAS,  
18TH FLOOR  
City-State-Zip: NEW YORK NY 10036

Title CFO  
Name OKUNAK, FRANK  
Address 919 THRID AVENUE  
City-State-Zip: NEW YORK NY 10022

Title AS  
Name CHIRICO, JIM  
Address 1114 AVENUE OF THE AMERICAS,  
18TH FLOOR  
City-State-Zip: NEW YORK NY 10036

*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: JIM CHIRICO

ASST SECRETARY

05/28/2014

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

\_\_\_\_\_  
Date