

No. C 201040		Due no later than Jan 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. OPTASENSE, INC. 5885 TRINITY PARKWAY SUITE 130 CENTREVILLE VA 20120-1969		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G STE 130 BOISE ID 83705			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	ROBERT ALLEN EVERS	5885 TRINITY PARKWAY SUITE 130	CENTREVILLE	VA	USA	20120-1969	
SECRETARY	ROBERT ALLEN EVERS	5885 TRINITY PARKWAY SUITE 130	CENTREVILLE	VA	USA	20120-1969	
TREASURER	BONNIE J. DENNIS	5885 TRINITY PARKWAY SUITE 130	CENTREVILLE	VA	USA	20120-1969	
DIRECTOR	NEVILLE SALKELD	5885 TRINITY PARKWAY SUITE 130	CENTREVILLE	VA	USA	20120-1969	
DIRECTOR	JAMES POLLARD	5885 TRINITY PARKWAY SUITE 130	CENTREVILLE	VA	USA	20120-1969	
DIRECTOR	DARRELL J. OYER	5885 TRINITY PARKWAY SUITE 130	CENTREVILLE	VA	USA	20120-1969	
DIRECTOR	ROBERT ALLEN EVERS	5885 TRINITY PARKWAY SUITE 130	CENTREVILLE	VA	USA	20120-1969	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
DE C 201040		Signature: Michelle Donato				Date: 12/09/2015	
		Name (type or print): Michelle Donato				Title: POA	
Processed 12/09/2015		* Electronically provided signatures are accepted as original signatures.					