


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2004 08:00 AM
Secretary of State

DOCUMENT # 809991
 1. Entity Name
GENERAL DYNAMICS CORPORATION



Principal Place of Business Mailing Address
GOVERNMENT CONTRACTOR **3190 FAIRVIEW PARK DR**
3190 FAIRVIEW PARK DRIVE **FALLS CHURCH, VA 22042**
FALLS CHURCH, VA 22042

DO NOT WRITE IN THIS SPACE



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number 13-1673581	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 RD.
PLANTATION, FL 33324

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BAIER, DAVID D 3190 FAIRVIEW PARK DR FALLS CHURCH, VA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVGC SAVNER, DAVID A 3190 FAIRVIEW PARK DR FALLS CHURCH, VA 22042
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KAMINSKI, PAUL G 6691 RUTLEDGE DRIVE FAIRFAX STATION, VA 22039
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEOD CHABRAJA, NICHOLAS D 3190 FAIRVIEW PARK DR FALLS CHURCH, VA 23
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVCF MANCUSO, MICHAEL J 3190 FAIRVIEW PARK DR FALLS CHURCH, VA 22042
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TVP FOGG, DAVID H 3190 FAIRVIEW PARK DR FALLS CHURCH, VA 22042

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 01/26/04-80068-019 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *David H Fogg* 1/20/04 (703) 876-3347
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #