


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # 809991
 1. Entity Name
GENERAL DYNAMICS CORPORATION



Principal Place of Business 2941 FAIRVIEW PARK DR SUITE 100 FALLS CHURCH, VA 22042	Mailing Address 2941 FAIRVIEW PARK DR SUITE 100 FALLS CHURCH, VA 22042
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04072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-1673581	Applied For 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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6. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAIER, DAVID D 2941 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 220424513
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVGC SAVNER, DAVID A 2941 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 220424513
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAMINSKI, PAUL G 2941 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 220424513
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD CHABRAJA, NICHOLAS D 2941 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 220424513
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVCF MANCUSO, MICHAEL J 2941 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 220424513
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVP FOGG, DAVID H 2941 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 220424513

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 05/05/06-80022-014 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 D. Baier* David D. Baier, VP-Taxes 4/11/06 (703) 876-3347

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #