2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#826385

Entity Name: ATK AEROSPACE COMPANY INC.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
201 S. MAII SUITE 400 SALT LAKE	N STREET E CITY, UT 84	111			
Current Mailing Address:			New Mailii	New Mailing Address:	
	K POWELL DLN DRIVE DLIS, MN 554:	361097			
FEI Number:	36-2678716	FEI Number Applied For ()	El Number Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324					
The above in the State		submits this statement for the purp	oose of changing it	s registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Agent		Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () FOOTE, JEFFE 201 S MAIN ST SALT LAKE CIT	, STE 400	Title: Name: Address: City-St-Zip:	DCCF (X) Change () Addition RANGEN, ERIC S 5050 LINCOLN DRIVE EDINA, MN 554361097	
Title: Name: Address: City-St-Zip:	DAVIDSON, AN 5050 LINCOLN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MCREAVY, RO 5050 LINCOLN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VT () AYERS, MICHA 201 S MAIN ST SALT LAKE CIT	#400	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () BELL, MICHAE 201 S MAIN ST SALT LAKE CIT	#400	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CAMPBELL, TR	EPORT CTR POB 160433	Title: Name: Address: City-St-Zip:	D (X) Change () Addition VLAHAKIS, NICHOLAS G 5050 LINCOLN DRIVE EDINA, MN 554361097	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ANN D. DAVIDSON VSD 04/27/2004