

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 07, 2000 8:00 am
Secretary of State

06-07-2000 90435 003 ***150.00

DOCUMENT # **852053** ✓
 1. Entity Name
ELECTRONIC WARFARE ASSOCIATES, INC.

Principal Place of Business Mailing Address
 13873 Park Center Rd 13873 Park Center Rd
 5th Floor 5th Floor
 Herndon, VA 20171 Herndon, VA 20171
 US US

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

4. FEI Number Applied For
54-1082215 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Nickelson, Bobby
3300 University Blvd.
Suite# 149
Winter Park, FL 32792

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	CPD	<input type="checkbox"/> Delete
NAME	Guerreri, Carl N.	
STREET ADDRESS	13873 Park Center Road	
CITY-ST-ZIP	Herndon, VA 22071	
TITLE	V	<input type="checkbox"/> Delete
NAME	Weinstein, Sidney	
STREET ADDRESS	13873 Park Center Road	
CITY-ST-ZIP	Herndon, VA 20171	
TITLE	VD	<input type="checkbox"/> Delete
NAME	Connolly, Edward T.	
STREET ADDRESS	13873 Park Center Road	
CITY-ST-ZIP	Herndon, VA 20171	
TITLE	V	<input type="checkbox"/> Delete
NAME	Kerr, Gary M.	
STREET ADDRESS	13873 Park Center Road	
CITY-ST-ZIP	Herndon, VA 20171	
TITLE	V	<input type="checkbox"/> Delete
NAME	Blake, Frank	
STREET ADDRESS	13873 Park Center Road	
CITY-ST-ZIP	Herndon, VA 20171	
TITLE	V	<input type="checkbox"/> Delete
NAME	Armstrong, Douglas	
STREET ADDRESS	13873 Park Center Road	
CITY-ST-ZIP	Herndon, VA 20171	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Gary M. Kerr** Date: **May 2, 2000** *Gary M. Kerr* Daytime Phone #: **(703) 904-5005**

CR2E034 (9/99)