

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90063 031 ***150.00

0570983 AT

DOCUMENT # F00000001073
1. Entity Name
SYSTEMS RESEARCH AND APPLICATIONS CORPORATION

Principal Place of Business
**4300 FAIR LAKE COURT
FAIRFAX VA 22033**

Mailing Address
**4300 FAIR LAKE COURT
FAIRFAX VA 22033**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4300 Fair Lakes Court

3. Mailing Address
4300 Fair Lakes Court

City & State
Fairfax, VA

City & State
Fairfax, VA

Zip
22033

Country

4. FEI Number
54-1013306

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	C BREHM, WILLIAM K 4300 FAIR LAKES COURT FAIRFAX VA 22033	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO VOLGENAU, ERNST DR 4300 FAIR LAKES COURT FAIRFAX VA 22033	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC NELSON, GARY R DR 4300 FAIR LAKES COURT FAIRFAX VA 22033	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV LEGASEY, EDWARD E 4300 FAIR LAKES COURT FAIRFAX VA 22033	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BLACK, MATTHEW DR. 4300 FAIR LAKES COURT FAIRFAX VA 22033	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PV DIPENTIMA, RENATO A DR. 4300 FAIR LAKES COURT FAIRFAX VA 22033	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICFO Stephen Hughes 4300 Fair Lakes Court Fairfax, VA 22033	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T Wayne Grubbs 4300 Fair Lakes Court Fairfax, VA 22033	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Wayne Grubbs** Date: **4-26-02** (703) 227-7011

CR2E034 (9/01)