

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F00000006561

Entity Name: WESTAT, INC.

FILED
Dec 19, 2005
Secretary of State

Current Principal Place of Business:

1650 RESEARCH BOULEVARD
ROCKVILLE, MD 20850

New Principal Place of Business:

Current Mailing Address:

1650 RESEARCH BOULEVARD
ROCKVILLE, MD 20850

New Mailing Address:

1650 RESEARCH BOULEVARD
MICHAEL K. LAGARDE
ROCKVILLE, MD 20850

FEI Number: 84-0529566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: MICHAEL K. LAGARDE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: WAKSBERG, JOSEPH
Address: 1650 RESEARCH BOULEVARD
City-St-Zip: ROCKVILLE, MD 20850

Title: PTD () Delete
Name: HUNT, JOSEPH A
Address: 1650 RESEARCH BOULEVARD
City-St-Zip: ROCKVILLE, MD 20850

Title: VSD () Delete
Name: MCKENNA, THOMAS W
Address: 1650 RESEARCH BOULEVARD
City-St-Zip: ROCKVILLE, MD 20850

Title: VD () Delete
Name: DIETZ, STEPHEN K
Address: 1650 RESEARCH BOULEVARD
City-St-Zip: ROCKVILLE, MD 20850

Title: V () Delete
Name: KALTON, GRAHAM
Address: 1650 RESEARCH BOULEVARD
City-St-Zip: ROCKVILLE, MD 20850

Title: VD () Delete
Name: SLOBASKY, RENEE
Address: 1650 RESEARCH BOULEVARD
City-St-Zip: ROCKVILLE, MD 20850

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL K. LAGARDE

Electronic Signature of Signing Officer or Director

ASEC

12/19/2005

Date