2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006419

FILED Jan 12, 2009 Secretary of State

Entity Name: GENERAL DYNAMICS ADVANCED INFORMATION SYSTEMS, INC.

Current Principal Place of Business:				New Principal Place of Business:	
12450 FAIR LAKES CIRCLE FAIRFAX, VA 22033					
Current Mailing Address:			New Mailing Address:		
12450 FAIR LAKES CIRCLE ATTN: CARRIE MOSS FAIRFAX, VA 22033			1421 JEFFERSON DAVIS HIGHWAY, SUITE 600 ATTN: CARRIE MOSS ARLINGTON, VA 22202		
FEI Number:	45-0484950	FEI Number Applied For ()	FEI Num	nber Not Applicable ()	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 RD. PLANTATION, FL 33324 US					
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:					
	Electronic	Signature of Registered Agent			Date
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	VP () D KAUFFMAN, MICH 12450 FAIR LAKE FAIRFAX, VA 220	HAEL W ES CIRCLE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () D DEMURO, GERAF 2941FAIRVIEW P FALLS CHURCH,	RD ARK DR.		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	P () D VON THAER, LEV 12450 FAIR LAKE FAIRFAX, VA 220	VIS ES CIRCLE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () D STURGES, NANC 12450 FAIR LAKE FAIRFAX, VA 220	Y L ES CIRCLE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP () D DUNN, MAURA M 12450 FAIR LAKE FAIRFAX, VA 220	S CIRCLE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	AS () D EDGAR, CHARLE 12450 FAIR LAKE FAIRFAX, VA 220	S E IV ES CIRCLE		Title: Name: Address: City-St-Zip:	() Change () Addition
I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 KAUFFMAN VP 01/12/2009