


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Apr 23, 1999 8:00 am**  
**Secretary of State**

04-23-1999 90172 005 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P06109**

1. Corporation Name  
**NORTHROP GRUMMAN CORPORATION**

Principal Place of Business 1840 CENTURY PARK EAST LOS ANGELES CA 90067-1578	Mailing Address 1840 CENTURY PARK EAST LOS ANGELES CA 90067-1578
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>05/20/1985</b>	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>95-1055798</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND ROAD**  
**PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

**FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>BORSTING, JACK R</b>	
STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
CITY-ST-ZIP	<b>LOS ANGELES CA</b>	
TITLE	<b>PCD</b>	<input type="checkbox"/> DELETE
NAME	<b>KRESA, KENT</b>	
STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
CITY-ST-ZIP	<b>LOS ANGELES CA</b>	
TITLE	<b>V</b>	<input type="checkbox"/> DELETE
NAME	<b>WAUGH, RICHARD B JR</b>	
STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
CITY-ST-ZIP	<b>LOS ANGELES CA</b>	
TITLE	<b>V</b>	<input type="checkbox"/> DELETE
NAME	<b>ELKIN, MARVIN</b>	
STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
CITY-ST-ZIP	<b>LOS ANGELES CA</b>	
TITLE	<b>SV</b>	<input type="checkbox"/> DELETE
NAME	<b>SALMAS, KATHLEEN</b>	
STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
CITY-ST-ZIP	<b>LOS ANGELES CA 90067</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>ROSENBERG, RICHARD</b>	
STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
CITY-ST-ZIP	<b>LOS ANGELES CA</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>CHAIN, JOHN T.</b>	
1.3 STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
1.4 CITY-ST-ZIP	<b>LOS ANGELES, CA. 90067-2199</b>	
2.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>EDWARD, JACK</b>	
2.3 STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
2.4 CITY-ST-ZIP	<b>LOS-ANGELES, CA. 90067-2199</b>	
3.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>FROST, PHILLIP</b>	
3.3 STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
3.4 CITY-ST-ZIP	<b>LOS ANGELES, CA. 90067-2199</b>	
4.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	<b>LUTZ, ROBERT</b>	
4.3 STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
4.4 CITY-ST-ZIP	<b>LOS ANGELES, CA. 90067-2199</b>	
5.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	<b>ROBSON, JOHN</b>	
5.3 STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
5.4 CITY-ST-ZIP	<b>LOS ANGELES, CA. 90067-2199</b>	
6.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	<b>STEGEMEIER, RICHARD</b>	
6.3 STREET ADDRESS	<b>1840 CENTURY PARK EAST</b>	
6.4 CITY-ST-ZIP	<b>LOS ANGELES, CA. 90067-2199</b>	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kathleen Salmas* **Kathleen Salmas** 417199  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)