

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 14, 2009
Secretary of State**

DOCUMENT# P10067

Entity Name: SIKORSKY SUPPORT SERVICES, INC.

Current Principal Place of Business:

6900 MAIN STREET
STRATFORD, CT 066159129 US

New Principal Place of Business:

Current Mailing Address:

6900 MAIN STREET
STRATFORD, CT 066159129 US

New Mailing Address:

FEI Number: 06-1113968 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JEFFREY
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 066159129 US

Title: V () Delete
Name: RICHARD
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 066159129 US

Title: V () Delete
Name: PETER
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 066159129 US

Title: S () Delete
Name: CHRISTOPHER
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 066159129 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PINO, JEFFREY
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 066159129 US

Title: V (X) Change () Addition
Name: CASWELL, RICHARD
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 066159129 US

Title: V (X) Change () Addition
Name: GRABER-LIPPERMAN, PETER
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 066159129 US

Title: S (X) Change () Addition
Name: BROGAN, CHRISTOPHER
Address: 6900 MAIN STREET
City-St-Zip: STRATFORD, CT 066159129 US

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: CHRISTOPHER BROGAN

S

07/14/2009

Electronic Signature of Signing Officer or Director

Date