2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001940

Entity Name: LOCKHEED MARTIN GYROCAM SYSTEMS LLC

Current Principal Place of Business:

5600 SAND LAKE RD
ORLANDO, FL 32819

Current Mailing Address:

PO BOX 61511
BLDG 100, RM U4632
KING OF PRUSSIA, PA 19406 US

FEI Number: 51-0469771

FILED
Jan 29, 2015
Secretary of State
CC4508811298

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

Authorized Person(s) Detail :

Title	MANAGER, CHAIRMAN
Name	GUNNING, ROBERT T JR.
Address	5600 SAND LAKE RD
City-State-Zip:	ORLANDO FL 32819

Title	MANAGER
Name	BRYAN, AL
Address	5600 SAND LAKE ROAD
City-State-Zip:	ORLANDO FL 32819

Title	MANAGER
Name	HUBER, DAVID J
Address	5600 SAND LAKE RD
City-State-Zip:	ORLANDO FL 32819

Title	MANAGER
Name	SIMPSON, BYRON
Address	5600 SAND LAKE RD
City-State-Zip:	ORLANDO FL 32819

Title	MANAGER
Name	HALL, RICHARD W
Address	5600 SAND LAKE RD
City-State-Zip:	ORLANDO FL 32819

Title	ASST. SECRETARY
Name	COLE, GLENN E
Address	6801 ROCKLEDGE DR
City-State-Zip:	BETHESDA MD 20817

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GLENN E COLE — ASSISTANT SECRETARY — 01/29/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date