

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1400006210

**Entity Name:** ASTROTECH SPACE OPERATIONS, LLC

**Current Principal Place of Business:**

1515 CHAFFEE DR  
TITUSVILLE, FL 32780

**Current Mailing Address:**

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

**FEI Number:** 47-1561780

**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 DIRECTOR, SECRETARY, VP  
Name MCNULTY, DANIEL A  
Address 12257 S WADSWORTH BLVD  
City-State-Zip: LITTLETON CO 80125

Title DIRECTOR, PRESIDENT  
Name WHITE, DON M JR.  
Address 1515 CHAFFEE DR  
City-State-Zip: TITUSVILLE FL 32780

Title ASST. SECRETARY  
Name ALLEN, KATHY L  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY  
Name CORDERO, MARITZA  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY  
Name HEYWOOD, DAVID A  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817

Title ASST. TREASURER  
Name WHITNEY, RENA H  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY  
Name ARDOUREL, BRITTNEY L  
Address PO BOX 179  
City-State-Zip: DENVER CO 80201

Title DIRECTOR  
Name SATTLER, JULIE A  
Address 1111 LOCKHEED MARTIN WAY  
City-State-Zip: SUNNYVALE CA 94089

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*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:** KEVIN F ZENCAK

**ASSISTANT SECRETARY** 04/11/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title DIRECTOR  
Name LINDELL, SCOTT D  
Address PO BOX 179  
City-State-Zip: DENVER CO 80201

Title ASST. SECRETARY  
Name BRADDEN, CHANEL M  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY  
Name ZENCAK, KEVIN F  
Address 230 MALL BLVD  
City-State-Zip: KING OF PRUSSIA PA 19406

Title DIRECTOR, CHAIRMAN  
Name STANISLAV, MARTIN T  
Address 12257 S WADSWORTH BLVD  
City-State-Zip: LITTLETON CO 80125

Title ASST. SECRETARY  
Name FASICK, JEFFREY K  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817

Title VP, TREASURER  
Name MOLLARD, JOHN W  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY  
Name BLOCK, MARIAN S  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817