

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852053

Entity Name: ELECTRONIC WARFARE ASSOCIATES, INC.

Current Principal Place of Business:

13873 PARK CENTER RD
#500
HERNDON, VA 20171

Current Mailing Address:

13873 PARK CENTER RD
#500
HERNDON, VA 20171 US

FEI Number: 54-1082215

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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

Officer/Director Detail :

Title CEOC
Name GUERRERI, CARL N
Address 13873 PARK CENTER ROAD
City-State-Zip: HERNDON VA 20171

Title D
Name MILLER, MARSHALL L
Address 1109 VILLAMAY BLVD.
City-State-Zip: ALEXANDRIA VA 22307

Title D
Name CHASE, ALLEN D
Address 13873 PARK CENTER ROAD
City-State-Zip: HERNDON VA 20171

Title DIRECTOR/SR. V.P./SEC/TREAS
Name MCNALLY, BRIAN P.
Address 13873 PARK CENTER RD
 #500
City-State-Zip: HERNDON VA 20171

Title ATTORNEY
Name LUXFORD, STEVE N.
Address 39 W BLAKELEY DRIVE
City-State-Zip: CHARLES TOWN WV 25414

Title DIRECTOR
Name O'NEILL, MALCOM R. DR.
Address 13873 PARK CENTER RD
 #500
City-State-Zip: HERNDON VA 20171

Title DIRECTOR
Name MONEY, ARTHUR L.
Address 13873 PARK CENTER RD
 #500
City-State-Zip: HERNDON VA 20171

Title DIRECTOR
Name SCHNEIDER, WILLIAM DR.
Address 13873 PARK CENTER RD
 #500
City-State-Zip: HERNDON VA 20171

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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 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 all other like empowered.

SIGNATURE: STEVE N. LUXFORD

ATTORNEY

04/22/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SULICK, MICHAEL J.
Address 13873 PARK CENTER RD
 #500
City-State-Zip: HERNDON VA 20171