

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000003401

**Entity Name:** CACI DYNAMIC SYSTEMS, INC.**Current Principal Place of Business:**1100 NORTH GLEBE ROAD  
ARLINGTON, VA 22201**Current Mailing Address:**1100 NORTH GLEBE ROAD  
ARLINGTON, VA 22201 US**FEI Number:** 54-1462136**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**Officer/Director Detail :**

Title            PRESIDENT  
Name            MENGUCCI, JOHN S.  
Address        1100 NORTH GLEBE ROAD  
City-State-Zip: ARLINGTON VA 22201

Title            VICE PRESIDENT  
Name            FOLKMAN, MICHAEL T.  
Address        1100 NORTH GLEBE ROAD  
City-State-Zip: ARLINGTON VA 22201

Title            SECRETARY  
Name            KOEGEL, J. WILLIAM JR.  
Address        1100 NORTH GLEBE ROAD  
City-State-Zip: ARLINGTON VA 22201

Title            TREASURER  
Name            MUTRYN, THOMAS A.  
Address        1100 NORTH GLEBE ROAD  
City-State-Zip: ARLINGTON VA 22201

Title            DIRECTOR  
Name            PHILLIPS, WARREN R.  
Address        2850 DAISY ROAD  
City-State-Zip: WOODBINE MD 21797

*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: MICHAEL T. FOLKMAN****VICE PRESIDENT****04/12/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date