2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0700000189

Entity Name: NORTHROP GRUMMAN SUPPORT SERVICES CORP.

Current Principal Place of Business:

2980 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042

Current Mailing Address:

2980 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042

FEI Number: 52-1280448

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

Officer/Director Detail :

	Title	Р	Title	SECRETARY
	Name	JONES, CHRISTOPHER T	Name	CHOUNG, SUSIE
	Address	2980 FAIRVIEW PARK DRIVE	Address	2980 FAIRVIEW PARK DRIVE
	City-State-Zip:	FALLS CHURCH VA 22042	City-State-Zip:	FALLS CHURCH VA 22042
	Title	DT	Title	ASST. TREASURER
	Name	MOVIUS, STEPHEN	Name	SPIEGEL, STEVEN D
	Address	2980 FAIRVIEW PARK DRIVE	Address	2980 FAIRVIEW PARK DRIVE
	City-State-Zip:	FALLS CHURCH VA 22042	City-State-Zip:	FALLS CHURCH VA 22042
	Title	VP	Title	ASST. SECRETARY
	Title Name	VP SHARP, KEN	Title Name	ASST. SECRETARY CHAVEZ, DON
	Name	SHARP, KEN	Name	CHAVEZ, DON
	Name Address City-State-Zip:	SHARP, KEN 2980 FAIRVIEW PARK DRIVE FALLS CHURCH VA 22042	Name Address	CHAVEZ, DON 2980 FAIRVIEW PARK DRIVE
	Name Address City-State-Zip: Title	SHARP, KEN 2980 FAIRVIEW PARK DRIVE FALLS CHURCH VA 22042 DIRECTOR	Name Address City-State-Zip:	CHAVEZ, DON 2980 FAIRVIEW PARK DRIVE FALLS CHURCH VA 22042
	Name Address City-State-Zip: Title Name	SHARP, KEN 2980 FAIRVIEW PARK DRIVE FALLS CHURCH VA 22042 DIRECTOR MCGAREY, JENNIFER C	Name Address City-State-Zip: Title	CHAVEZ, DON 2980 FAIRVIEW PARK DRIVE FALLS CHURCH VA 22042 ASST. TREASURER
	Name Address City-State-Zip: Title	SHARP, KEN 2980 FAIRVIEW PARK DRIVE FALLS CHURCH VA 22042 DIRECTOR	Name Address City-State-Zip: Title Name	CHAVEZ, DON 2980 FAIRVIEW PARK DRIVE FALLS CHURCH VA 22042 ASST. TREASURER STUCKEY, CHERYL

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: SUSIE L CHOUNG

SECRETARY

04/24/2019

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 24, 2019 Secretary of State 7067545225CC

Certificate of Status Desired: No

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Date