

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000002033

**Entity Name:** ELECTRONIC SYSTEMS, INC.

**Current Principal Place of Business:**

369 EDWIN DRIVE  
VIRGINIA BEACH, VA 23462

**Current Mailing Address:**

369 EDWIN DRIVE  
VIRGINIA BEACH, VA 23462 US

**FEI Number:** 54-1145980

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION  
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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name LANE, ANTHONY  
Address 369 EDWIN DRIVE  
City-State-Zip: VIRGINIA BEACH VA 23462

Title VTCFO  
Name SMITH, BOB  
Address 369 EDWIN DRIVE  
City-State-Zip: VIRGINIA BEACH VA 23462

Title D  
Name COOPER, DANIEL R  
Address 369 EDWIN DRIVE  
City-State-Zip: VIRGINIA BEACH VA 23462

Title VS  
Name KOSARZYCKI, ROXANNE  
Address 3903 NORTHDAL BLVD  
City-State-Zip: TAMPA FL 33624

Title D  
Name BASS, R EDWARD  
Address 3903 NORTHDAL BLVD  
City-State-Zip: TAMPA FL 33624

Title C  
Name SALIERNO, THOMAS L  
Address 3903 NORTHDAL BLVD  
City-State-Zip: TAMPA FL 33624

*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: ROXANNE KOSARZYCKI**

**SECRETARY**

**04/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date