## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000005184

Entity Name: THALES DEFENSE & SECURITY, INC.

**Current Principal Place of Business:** 

22605 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871

**Current Mailing Address:** 

22605 GATEWAY CENTER DRIVE CLARKSBURG, MD 20871 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

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

Date

**FILED** Apr 12, 2017

**Secretary of State** 

CC6604953929

Officer/Director Detail :

Title **TREASURER** Title SECRETARY MILLER, BRIAN MILLER, BRIAN Name Name

22605 GATEWAY CENTER DRIVE 22605 GATEWAY CENTER DRIVE Address Address

City-State-Zip: CLARKSBURG MD 20871 CLARKSBURG MD 20871 City-State-Zip:

Title DIRECTOR Title VΡ

Name CAMPBELL, LT. GENERAL WILLIAM H MILLER, BRIAN Name Address 22605 GATEWAY CENTER DRIVE Address 22605 GATEWAY CENTER DRIVE

CLARKSBURG MD 20871 City-State-Zip: City-State-Zip: CLARKSBURG MD 20871

Title DIRECTOR CFO Title

Name EDMONDS, LTG ALBERT Name MILLER, BRIAN

Address 22605 GATEWAY CENTER DRIVE 22605 GATEWAY CENTER DRIVE Address

CLARKSBURG MD 20871 City-State-Zip: CLARKSBURG MD 20871 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name KOLLMORGEN, REAR ADMIRAL LEE MILLER, ED Name 22605 GATEWAY CENTER DRIVE

Address 22605 GATEWAY CENTER DRIVE Address

City-State-Zip: CLARKSBURG MD 20871 CLARKSBURG MD 20871 City-State-Zip:

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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.

04/12/2017 **SECRETARY** SIGNATURE: BRIAN MILLER

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

TitleDIRECTORTitleDIRECTORNameHERBETS, MITCHNameBISHOP, DOUG

Address 22605 GATEWAY CENTER DRIVE Address 22605 GATEWAY CENTER DRIVE

Title

Name

VICE PRESIDENT - ENGINEERING

BISHOP, DOUG

City-State-Zip: CLARKSBURG MD 20871 City-State-Zip: CLARKSBURG MD 20871

Title CTO

Name BISHOP, DOUG

Address 22605 GATEWAY CENTER DRIVE Address 22605 GATEWAY CENTER DRIVE

City-State-Zip: CLARKSBURG MD 20871 City-State-Zip: CLARKSBURG MD 20871

Title DIRECTOR Title PRESIDENT

Name SHEEHAN, MICHAEL Name SHEEHAN, MICHAEL

Address 22605 GATEWAY CENTER DRIVE Address 22605 GATEWAY CENTER DRIVE

City-State-Zip: CLARKSBURG MD 20871 City-State-Zip: CLARKSBURG MD 20871