

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001355

**Entity Name:** BWXT NUCLEAR MAINTENANCE SERVICES, INC.**Current Principal Place of Business:**2016 MOUNT ATHOS ROAD  
LYNCHBURG, VA 24504**Current Mailing Address:**2016 MOUNT ATHOS ROAD  
LYNCHBURG, VA 24504 US**FEI Number:** 45-2651289**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**Officer/Director Detail :**

Title            PRESIDENT  
Name            CAMPLIN, KENNETH R.  
Address        2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504

Title            DIRECTOR  
Name            MCCABE, THOMAS E.  
Address        2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504

Title            DIRECTOR  
Name            BLACK, DAVID S.  
Address        2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504

Title            CORPORATE SECRETARY  
Name            GREGORY, RANDALL C.  
Address        2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504

Title            TREASURER  
Name            BLACK, DAVID S.  
Address        2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504

Title            DIRECTOR  
Name            CAMPLIN, KENNETH R.  
Address        2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504

Title            ASSISTANT SECRETARY  
Name            TAYLOR, THERESA B.  
Address        2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504

*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:** THERESA B. TAYLOR**ASSISTANT SECRETARY    04/17/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date