

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004009

Entity Name: LEIDOS FEDERAL HEALTHCARE, INC.

Current Principal Place of Business:

11951 FREEDOM DR
RESTON, VA 20190

FILED
Apr 27, 2017
Secretary of State
CC8030920351

Current Mailing Address:

PO BOX 61511, BLDG 100, RM U4632
KING OF PRUSSIA, PA 19406 US

FEI Number: 52-1069745

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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, DIRECTOR
Name REAGAN, JAMES C
Address 11951 FREEDOM DR
City-State-Zip: RESTON VA 20190

Title SECRETARY
Name VELDMAN, RAYMOND L
Address 11951 FREEDOM DR
City-State-Zip: RESTON VA 20190

Title TREASURER
Name CROWN, MARC H
Address 11951 FREEDOM DR
City-State-Zip: RESTON VA 20190

Title ASST. SECRETARY
Name BIRK, MATTHEW
Address 11951 FREEDOM DR
City-State-Zip: RESTON VA 20190

Title ASST. SECRETARY
Name KLIGYS, RAE
Address 11951 FREEDOM DR
City-State-Zip: RESTON VA 20190

Title DIRECTOR
Name MAFFEO, VINCENT A
Address 11951 FREEDOM DR
City-State-Zip: RESTON VA 20190

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: DONALD P MARTIN

**LIMITED POWER OF
ATTORNEY**

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date