

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10067

Entity Name: SIKORSKY SUPPORT SERVICES, INC.

FILED
Apr 29, 2017
Secretary of State
CC7902542249

Current Principal Place of Business:

6900 MAIN ST
PO BOX 9729
STRATFORD, CT 06615-9129

Current Mailing Address:

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

FEI Number: 06-1113968

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 DIRECTOR, CFO
Name BARILE, TONY
Address 6900 MAIN ST
City-State-Zip: STRATFORD CT 06615

Title DIRECTOR
Name LAFFERTY, LISA
Address 6900 MAIN ST
City-State-Zip: STRATFORD CT 06615

Title ASST. SECRETARY
Name ALLEN, KATHY L
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY
Name BRADDEN, CHANEL M
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY
Name CORDERO, MARITZA
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY
Name HEYWOOD, DAVID A
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY
Name KOHR, BEN
Address 6900 MAIN ST
City-State-Zip: STRATFORD CT 06615

Title ASST. SECRETARY
Name MARTIN, DONALD P
Address 230 MALL BLVD
City-State-Zip: KING OF PRUSSIA PA 19406

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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.

SIGNATURE: DONALD P MARTIN

ASSISTANT SECRETARY 04/29/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. TREASURER
Name WHITNEY, RENA H
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817

Title VP, CONTROLLER
Name SHAH, DANIELLE C
Address 199 BORTON LANDING RD
City-State-Zip: MOORESTOWN NJ 08057

Title SECRETARY
Name MURPHY, BRENDAN
Address 6900 MAIN ST
City-State-Zip: STRATFORD CT 06615-9129

Title PRESIDENT, DIRECTOR
Name ANDROS, JASON
Address 6900 MAIN ST
City-State-Zip: STRATFORD CT 06615-9129

Title VP, TREASURER
Name MOLLARD, JOHN W
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817

Title VP, ASST. SECRETARY, GENERAL
COUNSEL
Name REH, JOHN M
Address 6900 MAIN ST
City-State-Zip: STRATFORD CT 06615-9129

Title ASST. SECRETARY
Name FASICK, JEFFREY K
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817