

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10067

**Entity Name:** SIKORSKY SUPPORT SERVICES, INC.

**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  
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

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

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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 04/18/2018**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

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

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

Title DIRECTOR, CFO  
Name MAIN, GRAHAM A  
Address 6900 MAIN ST  
City-State-Zip: STRATFORD CT 06615

Title ASST. SECRETARY  
Name BLOCK, MARIAN S  
Address 6801 ROCKLEDGE DR  
City-State-Zip: BETHESDA MD 20817

Title ASST. SECRETARY  
Name ZENCAK, KEVIN F  
Address 230 MALL BLVD  
City-State-Zip: KING OF PRUSSIA PA 19406

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

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

Title DIRECTOR, PRESIDENT  
Name WALSH, CHRISTOPHER G  
Address 6900 MAIN ST  
City-State-Zip: STRATFORD CT 06615

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