2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State
05-11-2001 90304 041 ***150.00

0576720

DOCUMENT # 823136

1. Entity Name
ROLLS-ROYCE NORTH AMERICA HOLDINGS INC.

Principal Place of Business	Mailing Address
11911 FREEDOM DR. #600 RESTON VA 20190 US	11911 FREEDOM DR. #600 RESTON VA 20190 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
14850 CONFERENCE CTR DR.	14850 CONFERENCE CTR DR
Suite, Apt. #, etc.: SUITE 100	Suite, Apt. #, etc.: SUITE 100
City & State: CHANTILLY	City & State: CHANTILLY
Zip: VA 20151 Country:	Zip: VA 20151 Country:

4. FEI Number 13-2614137 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDO GUYETTE, JAMES M. 11911 FREEDOM DR, SUITE 600 RESTON VA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 14850 CONFERENCE CTR DR CHANTILLY, VA 20151
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SO SULLIVAN, MARY S. 11911 FREEDOM DR RESTON VA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 14850 CONFERENCE CTR DR CHANTILLY VA 20151
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WHETTON, DAVID J 11911 FREEDOM DR SUITE 600 RESTON VA	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BRADY, MARK 11911 FREEDOM DR, SUITE 600 RESTON VA 20190	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DALE, THOMAS P. 11911 FREEDOM DRIVE, SUITE 600 RESTON VA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 14850 CONFERENCE CTR DR. CHANTILLY, VA 20151
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	O ADDI, RICHARD J 11911 FREEDOM DR RESTON VA 20190	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 14850 CONFERENCE CTR DR CHANTILLY VA 20151

CR2E034 (10/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. Sullivan MARY S. SULLIVAN ASST SECRETARY 4/24/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #