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FILED  
May 13 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 837858 (0)  
1. Corporation Name  
LOGICON EAGLE TECHNOLOGY, INC.



Principal Place of Business  
2100 WASHINGTON BLVD.  
ARLINGTON VA 22204  
US

Mailing Address  
3701 SKYPARK DRIVE  
3701 SKYPARK DR.  
TORRANCE CA 90505  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

02/16/1977

4. FEI Number

54-0979029

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered  
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered  
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and filer, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME HARVEY, JAMES  
STREET ADDRESS 2100 WASHINGTON BLVD.  
CITY-ST-ZIP ARLINGTON VA

TITLE VSD ☐ DELETE

NAME MITCHELL, E. BENJAMIN JR  
STREET ADDRESS 3701 SKYPARK DR.  
CITY-ST-ZIP TORRANCE CA

TITLE V ☒ DELETE

NAME HUDAK, CARL M.  
STREET ADDRESS 2100 WASHINGTON BLVD.  
CITY-ST-ZIP ARLINGTON, VA 0

TITLE VD ☐ DELETE

NAME WEBSTER, RALPH L.  
STREET ADDRESS 3701 SKYPARK DR.  
CITY-ST-ZIP TORRANCE CA

TITLE D ☐ DELETE

NAME WOODHULL, JOHN R.  
STREET ADDRESS 3701 SKYPARK DR.  
CITY-ST-ZIP TORRANCE CA

TITLE V ☐ DELETE

NAME BALLARD, JAMES D  
STREET ADDRESS 2100 WASHINGTON BLVD.  
CITY-ST-ZIP ARLINGTON VA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*James D. Ballard*

James D. Ballard 4/21/98

(310) 373-0220

CR2E034 (10/97)