FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **841743** 1. Corporation Name

LOGICON, INC.

Principal Place of Business

Mailing Address

FILED May 12, 1999 8:00 am Secretary of State

05-12-1999 90009 028 ***150.00



| 3701 SKYPARK DRIVE TORRANCE CA 90505 | | 3701 SKYPARK DRIVE TORRANCE CA 90505 | | | | DO NOT WRITE IN THIS SPACE | | | | |
|--|--|---|--------------------|--|----------------------|--|----------|--|--|--|
| | | | | | | 3. Date Incorporated or Qualifed 10/31/1978 | | | | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | | 4. FEI Number Applied | For | | | |
| 21 222 W | 26 P.O. BOX 47 | P.O. BOX 471 | | | 95-2126773 Not App | icable | | | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional Status Desired | | nal | | | | |
| 27 ATTN: ROSE DEL | | | | | DICO | CO Fee Required | | | | |
| City & State City & State | | | | | | 6. Election Campaign Financing \$5.00 May | Зе | | | |
| 23 SAN P | EDRO, CA | SAN PEDRO, CA | | | | Trust Fund Contribution Added to Fee | s | | | |
| Zip | Country | Zip | _ | intry | | 8. This corporation owes the current year Intangible | | | | |
| 24 90731 | 25 LOS ANGELES | 29 90733 | 30 L | <u>os</u> | ANGELES | <u> </u> | <u>-</u> | | | |
| | 9. Name and Address of Current | Registered Agent | | | | 10. Name and Address of New Registered Agent | | | | |
| 07.0 | ACRECIA CUCTELL | | | 81 Name | | | | | | |
| CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD | | | | | Street Addres | ddress (P.O. Box Number is Not Acceptable) | | | | |
| PLANTATION FL 33324 | | | | | 83 | | | | | |
| • | | | | 84 | City | ty FL 85 Zip Code | | | | |
| A 2 and 1 and 2 an | | | | | | | | | | |
| 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. | | | | | | | | | | |
| | III lamiliai willi, and accept the obligate | 713 01, 0000011 501:0000, 1 1010 | | -100. | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent a | and title if applicable. (NOTE. | Registered | Agent | signature required w | | | | | |
| 12. | OFFICERS AND | | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN | | | | |
| TITLE | PD | □ADELETE | 1.1 TI | TLE | 1 | X Change □ | Addition | | | |
| NAME | WOODHULL, JOHN R | | 1.2 N | AME | | | | | | |
| STREET ADDRESS 3701 SKYPARK DR | | | 1.3 STREET ADDRESS | | ADDRESS | SEE ATTACHED LISTING | | | | |
| CITY-ST-ZIP | TORRANCE CA | | 1.4 CI | TY-ST- | ZiP | | | | | |
| TITLE | V | □ X DELETE | 2.1 TI | TLE | | | Addition | | | |
| NAME | Webster, Ralph L. | | 2.2 N | AME | | • | | | | |
| STREET ADDRESS | 3701 SKYPARK DR | | 2.3 STREET | | ADDRESS | | | | | |
| CITY-ST-ZIP | TORRANCE CA | | 2.4 CITY- | | -ZiP | | | | | |
| TITLE | ٧ | ☐ DELETE | 3.1 TITLE | |] | Change [| Addition | | | |
| NAME | DALTON, JAMES E. | | 3.2 NAME | | | | | | | |
| STREET ADDRESS | 6053 W. CENTURY BLVD | | 3.3 STREE | | ADDRESS | | \ | | | |
| CITY-ST-ZIP | LOS ANGELES CA | | 3.4. CITY- | | - ZIP | | | | | |
| TITLE | V | | 4.1 TITLE | | | X Change □ | Addition | | | |
| NAME | HARTWICK, R. DEAN | | 4. 2 N | IAME | | | 1 | | | |
| STREET ADDRESS 3701 SKYPARK DR | | 4 3 S | 4 3 STREET ADDRESS | | | ĺ | | | | |
| CITY-ST-ZIP | (O()((()()()()()()()()()()()()()()()()(| | TY-ST | ZIP | | | | | | |
| TITLE | V | (X DELETE | 5.1 TITLE | | | | Addition | | | |

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 suppliemental 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 estachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

62 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

ELKIN, MARVIN

3701 SKYPARK DR

TORRANCE, CA 00000

VS

1840 CENTURY PARK E

LOS ANGELES CA 90067

MITCHELL, E. BENJAMIN JR

DELETE

HARLAN JOHNSTON, VICE PRESIDENT 4/21/99

(310)831-0611

Change

Addition

CR2E034 (11/98)

=::33

546760-90004-28

OFFICERS AND DIRECTORS OF LOGICON,INC 3/12/99

| NAME | TITLE | ADDRESS | SSN |
|---------------------|---|---|-------------|
| Herbert W. Anderson | President & Director | 2411 Dulles Corner Park, #800 Herndon, VA 20171 | 190-28-3904 |
| Stephen C. Movius | Vice President & Chief Financial Officer and Director | 2411 Dulles Corner Park, #800 Herndon, VA 20171 | 552-31-7116 |
| Nelson Gibbs | Director | 1840 Century Park East Los Angeles, CA 90067 | 084-28-5216 |
| Nils Ericson | Vice President | 2100 Washington Blvd Arlington, VA 22204 | 183-30-9783 |
| James Perriello | Vice President | 8110 Gatehouse Road, Suite 400 W Falls Church, VA 22042-1212 | 012-30-4236 |
| C. Harlan Johnston | Vice President | 222 W. 6Th Street San Pedro, CA 90731 | 478-48-6458 |
| Martin F. Clark | Vice President | 2411 Dulles Corner Park, #800 Herndon, VA 20171 | 101-32-0907 |
| William S. Carrier | Vice President | 2411 Dulles Corner Park, #800 Herndon, VA 20171 | 240-66-1371 |
| John H. Mullan | Secretary | 1840 Century Park East Los Angeles, CA 90067 | 070-36-8178 |
| Kathleen M. Salmas | Assistant Secretary | 1840 Century Park East Los Angeles, CA 90067 | 563-96-3279 |