

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 91185 039 \*\*\*150.00

**DOCUMENT # 857307**

1. Entity Name  
**LOCKHEED MARTIN LOGISTICS MANAGEMENT, INC.**



Principal Place of Business  
**107 FREDERICK STREET  
GREENVILLE SC 29607  
US**

Mailing Address  
**107 FREDERICK ST  
GREENVILLE SC 29607  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **95-3487248**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

## 6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE	PCD	<input type="checkbox"/> Delete
NAME	POSEK, DAVID J	
STREET ADDRESS	107 FREDERICK STREET	
CITY-ST-ZIP	GREENVILLE SC 29607	
TITLE	VPGM	<input checked="" type="checkbox"/> Delete
NAME	JONES, CHARLES D	
STREET ADDRESS	107 FREDERICK ST	
CITY-ST-ZIP	GREENVILLE SC 29607	
TITLE	S	<input type="checkbox"/> Delete
NAME	KREGER, STEVE W	
STREET ADDRESS	107 FREDERICK ST	
CITY-ST-ZIP	GREENVILLE SC 29607	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	MCGREGOR, JANET L	
STREET ADDRESS	6801 ROCKLEDGE DRIVE	
CITY-ST-ZIP	BETHESDA MD 20817	
TITLE	D	<input type="checkbox"/> Delete
NAME	CAMARDO, MICHAEL	
STREET ADDRESS	2339 ROUTE 70 WEST	
CITY-ST-ZIP	CHERRY HILL NJ 08358	
TITLE	ATD	<input type="checkbox"/> Delete
NAME	KAPP, MICHAEL D	
STREET ADDRESS	101 ROCKBERRY TERRACE	
CITY-ST-ZIP	SIMPSONVILLE SC 29681	

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP/GM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mitchell, David F.	
STREET ADDRESS	107 Frederick Street	
CITY-ST-ZIP	Greenville, SC 29607	
TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Murray, Neal J.	
STREET ADDRESS	2339 Route 70 West	
CITY-ST-ZIP	Cherry Hill	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kreger, Stephen W.	
STREET ADDRESS	107 Frederick Street	
CITY-ST-ZIP	Greenville, SC 29607	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Van Schaick, Anthony G	
STREET ADDRESS	6801 Rockledge Dr., MP 260	
CITY-ST-ZIP	Bethesda MD 20817	
TITLE	D/EVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Camardo, Michael	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kapp, Michael D.	
STREET ADDRESS	107 Frederick Street	
CITY-ST-ZIP	Greenville, SC 29607	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: Stephen W. Kreger, Secretary**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**04/15/03**

Date

**864-422-6413**

Daytime Phone #

CR2E034 (10/02)

# Attachment

## 2003 For Profit Corporation Uniform Business Report (UBR) – cont.

#857387

20031312

### Additions to Officers and Directors in 11

Title	AS
Name	Barrett, Karen J.
Street Address	6801 Rockledge Dr., MP 260
City-St-Zip	Bethesda MD, 20817
Title	AS
Name	Goldstein, Stuart D.
Street Address	6801 Rockledge Dr., MP 260
City-St-Zip	Bethesda MD, 20817
Title	AS
Name	Kemmer, Frederick O.
Street Address	6801 Rockledge Dr., MP 260
City-St-Zip	Bethesda MD, 20817
Title	AT
Name	Ide, Marcus B.
Street Address	6801 Rockledge Dr., MP 260
City-St-Zip	Bethesda MD, 20817
Title	AT
Name	Mearkle, Connie
Street Address	6801 Rockledge Dr., MP 260
City-St-Zip	Bethesda MD, 20817