

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

**FILED**  
**May 13 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 857323 (0)**

1. Corporation Name  
**GTE GOVERNMENT SYSTEMS CORPORATION**



Principal Place of Business <b>77TH A-STREET                  77 "A" STREET                  NEEDHAM MA 02194                  US</b>	Mailing Address <b>15000 CONFERENCE CTR DR                  CHANTILLY VA 22021                  US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

3. Date Incorporated or Qualified <b>08/04/1983</b>	
4. FEI Number <b>16-1180245</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

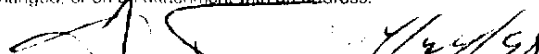
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. City <b>FL</b> 85. Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-instating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPGM	1.1 TITLE	
NAME	DEMURO, GERARD J	1.2 NAME	
STREET ADDRESS	400 JOHN QUINCY ADAMS RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	TAUNTON MA	1.4 CITY-ST-ZIP	
TITLE	S/D	2.1 TITLE	
NAME	DROST, MARIANNE	2.2 NAME	
STREET ADDRESS	ONE STAMFORD FORUM	2.3 STREET ADDRESS	
CITY-ST-ZIP	STAMFORD CT	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	
NAME	MONAGHAM, DAVID B.	3.2 NAME	
STREET ADDRESS	77 "A" STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEEDHAM MA	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	
NAME	DER MARDEROSIAN, ARMEN	4.2 NAME	
STREET ADDRESS	77 "A" STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEEDHAM MA	4.4 CITY-ST-ZIP	
TITLE	VPGM	5.1 TITLE	
NAME	DUTTON, ROBERT K	5.2 NAME	
STREET ADDRESS	400 JOHN QUINCY ADAMS RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAUNTON MA	5.4 CITY-ST-ZIP	
TITLE	VPGM	6.1 TITLE	
NAME	GERARD, EVAN L	6.2 NAME	
STREET ADDRESS	100 FERGUSON DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	MOUNTAIN VIEW CA	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:  (703) 818-4000

CR2E034 (10/97)