


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90137 033 ***150.00

DOCUMENT # F02000001713	
1. Entity Name ACS DEFENSE, INC.	

Principal Place of Business ATTN: WAYNE LEWIS 2828 NORTH HASKELL AVE., FL-10 DALLAS TX 75204	Mailing Address ATTN: WAYNE LEWIS 2828 NORTH HASKELL AVE., FL-10 DALLAS TX 75204
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2. Principal Place of Business Five Burlington Woods	3. Mailing Address
Suite, Apt. #, etc. 100	Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State Burlington, MA	City & State	4. FEI Number 04-2449817	Applied For Not Applicable
Zip 01803	Country USA	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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 _____ (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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Delete CARDILE, FRANK FIVE BURLINGTON WOODS, #100 BURLINGTON MA 01803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete REXFORD, JOHN 2828 N. HASKELL AVE., FL-10 DALLAS TX 75204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input type="checkbox"/> Delete DECKELMAN, WILLIAM L JR. 2828 N. HASKELL AVE., FL-10 DALLAS TX 75204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete VINEYARD, NANCY P 2828 N. HASKELL AVE., FL-9 DALLAS TX 75204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD <input type="checkbox"/> Delete RICH, JEFFREY A 2828 N. HASKELL AVE., FL-10 DALLAS TX 75204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Lewis, Wayne R. 2828 N. Haskell, Bldg. 1, FL-10 Dallas, TX 75204
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Wayne R. Lewis **REQUIRED** Wayne R. Lewis, Assistant Secretary 4/4/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (10/02)