

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001756

Entity Name: D.P. ASSOCIATES INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

6196 LAKE GRAY BLVD
STE 112
JACKSONVILLE, FL 32244

Current Mailing Address:

6196 LAKE GRAY BLVD
STE 112
JACKSONVILLE, FL 32244

New Principal Place of Business:

3401 COLUMBIA PIKE
4TH FLR
ARLINGTON, VA 22202

New Mailing Address:

C/O L-3 COMMUNICATIONS CORPORATION
600 THIRD AV
NEW YORK, NY 10016

FEI Number: 54-1389520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, AUGUSTUS
6196 LAKE GRAY BLVD
STE 112
JACKSONVILLE, FL 32244 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPS () Delete
Name: PATTERSON JR., DONALD J
Address: 3105 NORTHWOOD RD
City-St-Zip: FAIRFAX, VA 22031

Title: VCVP () Delete
Name: MORELL, ALLEN
Address: 5900 BOKEL DR
City-St-Zip: CHANTILLY, VA 22021

Title: AVP () Delete
Name: VAN BLERKOM, LAWRENCE
Address: 600 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10016 US

Title: TREAS () Delete
Name: SOUZA, STEPHEN
Address: 600 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10016 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SECD () Change (X) Addition
Name: CAMBRIA, CHRISTOPHER C
Address: 600 THIRD AV
City-St-Zip: NEW YORK, NY 10016

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE VAN BLERKOM

AVP

04/24/2007

Electronic Signature of Signing Officer or Director

Date