

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004123

Entity Name: SCITOR CORPORATION

FILED
Jan 17, 2008
Secretary of State

Current Principal Place of Business:

2251 CORPORATE PARK DRIVE
3RD FLOOR
HERNDON, VA 20171

New Principal Place of Business:

Current Mailing Address:

2251 CORPORATE PARK DRIVE
HERNDON, VA 20171

New Mailing Address:

FEI Number: 94-2622443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO () Delete
Name: HOSKINS, JAMES M
Address: 2251 CORPORATE PARK DRIVE
City-St-Zip: HERNDON, VA 20171

Title: PCOD () Delete
Name: PAUL, CANTEY
Address: 2251 CORPORATE PARK DRIVE
City-St-Zip: HERNDON, VA 20171

Title: TSCF () Delete
Name: KOSINSKI, ROBERT
Address: 2251 CORPORATE PARK DRIVE
City-St-Zip: HERNDON, VA 20171

Title: D () Delete
Name: DICKMAN, KATHLEEN T
Address: 2251 CORPORATE PARK DRIVE
City-St-Zip: HERNDON, VA 20171

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: TAYLOR, JAMES R
Address: 2251 CORPORATE PARK DRIVE
City-St-Zip: HERNDON, VA 20171

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

Title: D (X) Change () Addition
Name: SEIFFER, JONATHAN
Address: 11111 SANTA MONICA BLVD
City-St-Zip: LOS ANGELES, CA 90025

Title: D () Change (X) Addition
Name: NOLAN, PETER
Address: 11111 SANTA MONICA BLVD
City-St-Zip: LOS ANGELES, CA 90025

I hereby certify that the information supplied with this filing does not qualify 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: BERNARD J KOTARSKI

MGR

01/17/2008

Electronic Signature of Signing Officer or Director

Date