

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000789

FILED
Jan 30, 2007
Secretary of State

Entity Name: BAE SYSTEMS INFORMATION AND ELECTRONIC SYSTEMS INTEGRATION INC

Current Principal Place of Business:

65 SPIT BROOK ROAD
NASHUA, NH 03061

New Principal Place of Business:

Current Mailing Address:

13850 MCLEAREN RD
C/O SYLVIA LACY-CROW
HERNDON, VA 20171

New Mailing Address:

FEI Number: 52-2268742 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: D () Delete
Name: RONALD, MARK H
Address: 1601 RESEARCH BLVD.
City-St-Zip: ROCKVILLE, MD 20850

Title: DVAS () Delete
Name: CHESTON, SHEILA C
Address: 1601 RESEARCH BLVD.
City-St-Zip: ROCKVILLE, MD 20850

Title: P () Delete
Name: HAVENSTEIN, WALTER P
Address: 65 SPIT BROOK ROAD
City-St-Zip: NASHUA, NH 03061

Title: S () Delete
Name: PERKINS, KEVIN
Address: 65 SPIT BROOK ROAD
City-St-Zip: NASHUA, NH 03061

Title: VT () Delete
Name: JACOBS, BRADLEY W
Address: 65 SPIT BROOK ROAD
City-St-Zip: NASHUA, NH 03061

Title: AS () Delete
Name: COBB, PAUL W JR
Address: 1601 RESEARCH BLVD
City-St-Zip: ROCKVILLE, MD 20171

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HAVENSTEIN, WALTER P
Address: 1601 RESEARCH BLVD.
City-St-Zip: ROCKVILLE, MD 20850

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

Title: P (X) Change () Addition
Name: HEFFRON, MICHAEL
Address: 65 SPIT BROOK ROAD
City-St-Zip: NASHUA, NH 03061

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

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

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

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: PAUL W COBB, JR

AS

01/30/2007

Electronic Signature of Signing Officer or Director

_____ Date