## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000001322

Entity Name: MANAGEMENT ANALYSIS, INCORPORATED

FILED Jan 07, 2011 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 

2070 CHAIN BRIDGE ROAD STE. 550 VIENNA, VA 22182

**Current Mailing Address: New Mailing Address:** 

2070 CHAIN BRIDGE ROAD STE. 550 VIENNA, VA 22182

FEI Number: 52-1103414 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLORIDA INCORPORATIONG AND REGISTERED AGEN 122 WEST HILLCREST STREET

ALTAMONTE SPRINGS, FL 32714 US FLORIDA INCORPORATION AND REGISTERED AGEN 122 WEST HILLCREST STREET ALTAMONTE SPRINGS, FL 32714 US

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: FLORIDA INCORPORATION AND REGISTERED AGENT 01/07/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: CFO

SMITH, ARTHUR L Name: 9823 VALE ROAD Address: City-St-Zip: VIENNA, VA 22182

Title:

Name: WIGGS, KEVIN D 2536 KIRKLYN STREET Address: FALLS CHUCH, VA 22043 City-St-Zip:

Title:

SMITH, TONAS A Name: 417 OAK LAKE CIRCLE Address:

City-St-Zip: NORTH MYRTLE BEACH, SC 29582

Title:

KINDER, JAMES V Name: Address: 12588 BIRKDALE WAY City-St-Zip: FAIRFAX, VA 22030

Title:

Name: STUART, MAREN

Address: 4550 STRUTFIELD LANE, #2124 City-St-Zip: ALEXANDRIA, VA 22311

I hereby 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 all other like empowered.

SIGNATURE: JAMES KINDER O 01/07/2011