

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003180

FILED
Apr 29, 2009
Secretary of State

Entity Name: CHENEGA TECHNOLOGY SERVICES CORPORATION

Current Principal Place of Business:

5911 KINGSTOWNE VILLAGE PARKWAY, SUITE 300
ALEXANDRIA, VA 22315

New Principal Place of Business:

Current Mailing Address:

5911 KINGSTOWNE VILLAGE PARKWAY, SUITE 300
ALEXANDRIA, VA 22315

New Mailing Address:

FEI Number: 92-0162413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR, SUITE 4
WESTON, FL 33331 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: SELANOFF, NORMA
Address: 3000 C STREET, SUITE 301
City-St-Zip: ANCHORAGE, AK 99503

Title: D () Delete
Name: PIPKIN, PHYLLIS
Address: 3000 C STREET, SUITE 301
City-St-Zip: ANCHORAGE, AK 99503

Title: P () Delete
Name: OGDEN, KEN
Address: 5911 KINGSTOWNE VILLAGE PARKWAY, SUITE 300
City-St-Zip: ALEXANDRIA, VA 22315

Title: S () Delete
Name: HOLLOWAY, JAMES C
Address: 5911 KINGSTOWNE VILLAGE PARKWAY, SUITE 300
City-St-Zip: ALEXANDRIA, VA 22315

Title: T () Delete
Name: PETITT, VICKI
Address: 5911 KINGSTOWNE VILLAGE PARKWAY, SUITE 300
City-St-Zip: ALEXANDRIA, VA 22315

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

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: VICKI PETITT

T

04/29/2009

Electronic Signature of Signing Officer or Director

Date