

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90073 001 ***150.00

DOCUMENT # F04000003473

1. Entity Name
**EWA INFORMATION AND INFRASTRUCTURE
TECHNOLOGIES, INC.**



Principal Place of Business
**13873 PARK CENTER ROAD, SUITE 200
HERNDON, VA 20171**

Mailing Address
**13873 PARK CENTER ROAD, SUITE 200
HERNDON, VA 20171**

DO NOT WRITE IN THIS SPACE



01242007 No Chg-P CR2E034 (11/05)

4. FEI Number
54-1852462

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CP
LINDQUIST, JOHN
13873 PARK CENTER ROAD, SUITE 200
HERNDON, VA 20171**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VCST
MILLS, FRANCIS
13873 PARK CENTER ROAD, SUITE 200
HERNDON, VA 20171**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
RICHMOND, GARY
13873 PARK CENTER ROAD, SUITE 200
HERNDON, VA 20171**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FRIEDEL, RICHARD
13873 PARK CENTER ROAD, SUITE 200
HERNDON, VA 20171**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
WOLFE, PAUL
13873 PARK CENTER ROAD, SUITE 200
HERNDON, VA 20171**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
CLEMMONS, STEVEN
13873 PARK CENTER ROAD, SUITE 200
HERNDON, VA 20171**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27 APR 07

Date

703-478-7600

Daytime Phone #

ATTACHMENT

40111900

#F04600003473

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STEINMETZ, JAY 13873 PARK CENTER ROAD, SUITE 200 HERNDON, VA 20171
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DOW, JAMES 13873 PARK CENTER ROAD, SUITE 200 HERNDON, VA 20171
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONOWAY, JOHN 13873 PARK CENTER ROAD, SUITE 200 HERNDON, VA 20171
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABRAMS, JOHN 13873 PARK CENTER ROAD, SUITE 200 HERNDON, VA 20171
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KERR, GARY 13873 PARK CENTER ROAD, SUITE 200 HERNDON, VA 20171
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HONIGMAN, STEVEN 13873 PARK CENTER ROAD, SUITE 200 HERNDON, VA 20171