

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006097

Entity Name: EADS NORTH AMERICA, INC.

FILED
Sep 16, 2005
Secretary of State

Current Principal Place of Business:

815 CONNECTICUT AVE. N.W.
STE. 700
WASHINGTON, DC 20006

Current Mailing Address:

815 CONNECTICUT AVE. N.W.
STE. 700
WASHINGTON, DC 20006

New Principal Place of Business:

1616 N. FT. MYER DR.
STE. 1600
ARLINGTON, VA 22209

New Mailing Address:

1616 N. FT. MYER DR.
STE. 1600
ARLINGTON, VA 22209

FEI Number: 13-1833529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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: CROSBY, RALPH D JR
Address: 1616 NORTH FT. MYERS
City-St-Zip: ARLINGTON, VA 22209

Title: COO () Delete
Name: OLIVER, DAVID JR
Address: 1616 NORTH FT. MYERS
City-St-Zip: ARLINGTON, VA 22209

Title: V () Delete
Name: LIBERATORE, ROBERT
Address: 1401 H STREET NW STE 700
City-St-Zip: WASHINGTON, DC 200052110

Title: V () Delete
Name: GERGORIN, JEAN-LOUIS
Address: 37 BLVD. DE MONTMORENCY
City-St-Zip: PARIS, CEDEZ, FRANCE 75781,

Title: CFO () Delete
Name: RING, HANS-PETER
Address: LUDWIG-BOLKOW-LLEE, GEV 6.1
City-St-Zip: OTTOBRUNN, GERMANY 85521,

Title: C () Delete
Name: MCARTOR, ALLAN
Address: 198 VAN BUREN STREET
City-St-Zip: HERDON, VA 20170

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
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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 Section 119.07(3)(i), 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: PIERRE CARDIN

SEC

09/16/2005

Electronic Signature of Signing Officer or Director

Date