


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90039 037 ***150.00

DOCUMENT # F04000006526					
1. Entity Name NORTHROP GRUMMAN DEFENSE MISSION SYSTEMS, INC.					
Principal Place of Business 1840 CENTURY PARK EAST LOS ANGELES CA 90067			Mailing Address 1840 CENTURY PARK EAST LOS ANGELES CA 90067		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 54-2131161	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MYERS, ALBERT F 1840 CENTURY PARK EAST LOS ANGELES CA 90067	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCKENZIE, GARY W 1840 CENTURY PARK EAST LOS ANGELES CA 90067	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MOVIUS, STEPHEN C 1840 CENTURY PARK EAST LOS ANGELES CA 90067	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RHINE, BARRY L 1840 CENTURY PARK EAST LOS ANGELES CA 90067	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WINTER, DONALD C 1840 CENTURY PARK EAST LOS ANGELES CA 90067	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SALMAS, KATHLEEN M 1840 CENTURY PARK EAST LOS ANGELES CA 90067	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 empowered.					
SIGNATURE: <i>Kathleen M. Salmas</i> KATHLEEN M. SALMAS				03/18 /2005	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	

ATTACHMENT

20031464

#104000066526

Additional Directors & Officers of

NORTHROP GRUMMAN DEFENSE MISSION SYSTEMS, INC.

TITLE	D
NAME	MULLAN, JOHN H
STREET ADDRESS	1840 CENTURY PARK EAST
City - ST - ZIP	LOS ANGELES CA 90067

TITLE	AS
NAME	KLONTZ, MARSHA A
STREET ADDRESS	1840 CENTURY PARK EAST
City - ST - ZIP	LOS ANGELES CA 90067

TITLE	AT
NAME	RABINOWITZ, MARK A
STREET ADDRESS	1840 CENTURY PARK EAST
City - ST - ZIP	LOS ANGELES CA 90067

TITLE	AT
NAME	STRAITS, LLOYD A
STREET ADDRESS	1840 CENTURY PARK EAST
City - ST - ZIP	LOS ANGELES CA 90067