2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002044

Entity Name: ALION - JJMA CORPORATION

FILED Apr 22, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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1750 TYSONS BLVD. SUITE 1300

MCLEAN, VA 22102 US

Current Mailing Address: New Mailing Address:

C/O ALION SCIENCE - ATTN: M. ABLES 1000 BURR RIDGE PARKWAY, SUITE 202 ATTN: MICHAEL ABLES

10 WEST 35TH ST ATTN: MICHAEL ABLES CHICAGO, IL 60616 BURR RIDGE, IL 60527

FEI Number: 13-5679965 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: MENDLER, STACY J

Address: 1750 TYSONS BLVD., STE. 1300

City-St-Zip: MCLEAN, VA 22102

Title: TD

Name: ALBER, MICHAEL J

Address: 1750 TYSONS BLVD., SUITE 1300

City-St-Zip: MCLEAN, VA 22102

Title: S

Name: MCCABE, THOMAS E

Address: 1750 TYSONS BLVD., SUITE 1300

City-St-Zip: MCLEAN, VA 22102

Title: REP

Name: ABLES, MICHAEL S

Address: 1000 BURR RIDGE PARKWAY, SUITE 202

City-St-Zip: BURR RIDGE, IL 60527

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: MICHAEL S. ABLES REP 04/22/2011