## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003351

Entity Name: ALION - MA&D CORPORATION

## FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

 4949 PEARL CIRCLE EAST
 4949 PEARL CIRCLE EAST

 STE. 300
 STE. 300

 BOULDER, CO 80301
 BOULDER, CO 80301

Current Mailing Address: New Mailing Address:

C/O ALION SCIENCE - ATTN. M. ABLES

10 WEST 35TH ST

CHICAGO, IL 60616

C/O ALION SCIENCE - ATTN. M. ABLES

10 WEST 35TH STREET

CHICAGO, IL 60616

US

FEI Number: 84-1145568 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:

C T 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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name:MENDLER, STACY JName:MENDLER, STACY JAddress:1750 TYSONS BLVD., STE. 1300Address:1750 TYSONS BLVD., STE. 1300

City-St-Zip: MC LEAN, VA 22102 City-St-Zip: MC LEAN, VA 22102 US

ORY-01-21P. WE LEAN, VA 22102

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: HUGHES, JOHN M Name: ALBER, MICHAEL J

Address: 1750 TYSONS BLVD., STE. 1300 Address: 1750 TYSONS BLVD., STE. 1300

City-St-Zip: MC LEAN, VA 22102 City-St-Zip: MC LEAN, VA 22102 US

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: FONTANA, JAMES C Name: FONTANA, JAMES C

Address: 1750 TYSONS BLVD STE 1300 Address: 1750 TYSONS BLVD., STE. 1300

City-St-Zip: MC LEAN, VA 22102 City-St-Zip: MC LEAN, VA 22102 US

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: STACY J. MENDLER P 04/17/2009