

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001529

FILED
Feb 25, 2009
Secretary of State

Entity Name: BAUM, ROMSTEDT TECHNOLOGY RESEARCH CORPORATION

Current Principal Place of Business:

8260 WILLOW OAKS CORPORATE DR., SUITE 800
FAIRFAX, VA 22031

New Principal Place of Business:

Current Mailing Address:

8260 WILLOW OAKS CORPORATE DR., SUITE 800
FAIRFAX, VA 22031

New Mailing Address:

FEI Number: 54-1338885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., STE. 4
WESTON, FL 33331 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: PRES () Delete
Name: SCOTT, CRAIG
Address: 8260 WILLOW OAKS CORPORATE DR., SUITE 800
City-St-Zip: FAIRFAX, VA 22031

Title: VP () Delete
Name: OLIVER, DENISE
Address: 8260 WILLOW OAKS CORPORATE DR., SUITE 800
City-St-Zip: FAIRFAX, VA 22031

Title: DIR () Delete
Name: VILLA, CHRISTINE
Address: 8260 WILLOW OAKS CORPORATE DR., SUITE 800
City-St-Zip: FAIRFAX, VA 22031

Title: COO () Delete
Name: MCDONALD, LARRY
Address: 8260 WILLOW OAKS CORPORATE DR., SUITE 800
City-St-Zip: FAIRFAX, VA 22031

Title: CEO () Delete
Name: THOMAS, THERESA
Address: 8260 WILLOW OAKS CORP DR, STE 800
City-St-Zip: FAIRFAX, VA 22031

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
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 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: DENISE OLIVER

CBO

02/25/2009

Electronic Signature of Signing Officer or Director

Date