

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000262

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: BAE SYSTEMS INFORMATION TECHNOLOGY INC.

## Current Principal Place of Business:

8201 GREENSBORO DR., STE. 1200  
MCLEAN, VA 22102

## New Principal Place of Business:

## Current Mailing Address:

13850 MCLEAREN RD.  
HERNDON, VA 20171

## New Mailing Address:

FEI Number: 54-1168311

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
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: D ( ) Delete  
Name: HAVENSTEIN, WALTER P.  
Address: 1601 RESEARCH BLVD.  
City-St-Zip: ROCKVILLE, MD 20850

Title: DVAS ( ) Delete  
Name: CHESTON, SHEILA C.  
Address: 1601 RESEARCH BLVD.  
City-St-Zip: ROCKVILLE, MD 20850

Title: P ( ) Delete  
Name: SCHIEFFELIN, RICHARD R.  
Address: 8201 GREENSBORO DR., STE. 1200  
City-St-Zip: MCLEAN, VA 22102

Title: VPS ( ) Delete  
Name: PARRA, RAYMOND A  
Address: 1300 N 17TH SR  
City-St-Zip: ARLINGTON, VA 22209

Title: AS ( ) Delete  
Name: COBB, PAUL W. JR.  
Address: 1601 RESEARCH BLVD.  
City-St-Zip: ROCKVILLE, VA 20850

Title: VPT (X) Delete  
Name: SCHMITT, JAYNE A.  
Address: 1300 N. 17 ST., STE. 1400  
City-St-Zip: ARLINGTON, VA 22209

## 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: VPS (X) Change ( ) Addition  
Name: PARRA, RAYMOND A  
Address: 1300 N 17TH ST  
City-St-Zip: ARLINGTON, VA 22209

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: PAUL W. COBB, JR.

AS

04/08/2009

Electronic Signature of Signing Officer or Director

Date