

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001398

FILED
Feb 26, 2010
Secretary of State

Entity Name: EADS NORTH AMERICA, INC.

Current Principal Place of Business:

1616 FORT MYER DRIVE, 1600
ARLINGTON, VA 22209

New Principal Place of Business:

Current Mailing Address:

1616 FORT MYER DRIVE, 1600
ARLINGTON, VA 22209

New Mailing Address:

FEI Number: 95-3174837 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: V
Name: BURNETT, DENNIS
Address: 1616 FORT MYER DRIVE, 1600
City-St-Zip: ARLINGTON, VA 22209

Title: SEC
Name: CARDIN, PIERRE
Address: 1616 FORT MYER DRIVE, 1600
City-St-Zip: ARLINGTON, VA 22209

Title: CCEO
Name: O'KEEFE, SEAN
Address: 1616 FORT MYER DRIVE, 1600
City-St-Zip: ARLINGTON, VA 22209

Title: T
Name: EMERSON, CHRISTOPHER
Address: 1616 FORT MYER DRIVE, 1600
City-St-Zip: ARLINGTON, VA 22209

Title: V
Name: NATHAN, HARVEY
Address: 1616 FORT MYER DRIVE, 1600
City-St-Zip: ARLINGTON, VA 22209

Title: V
Name: OLIVER, DAVID
Address: 1616 FORT MYER DRIVE, 1600
City-St-Zip: ARLINGTON, VA 22209

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: PIERRE CARDIN

SEC

02/26/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date