

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002462

FILED  
Apr 01, 2009  
Secretary of State

**Entity Name:** GENERAL DYNAMICS ORDNANCE AND TACTICAL SYSTEMS - SIMUNITION OPERATIONS, INC.

**Current Principal Place of Business:**

11399 16TH COURT NORTH  
SUITE 200  
ST. PETERSBURG, FL 33716

**New Principal Place of Business:**

**Current Mailing Address:**

2941 FAIRVIEW PARK DRIVE, SUITE 100  
FALLS CHURCH, VA 220424513

**New Mailing Address:**

11399 16TH COURT NORTH  
SUITE 200  
ST. PETERSBURG, FL 33716

**FEI Number:** 54-1657251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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: PD ( ) Delete  
Name: FALARDEAU, ANDRE  
Address: 5 MONTEE DES ARSENAUX, LE GARDEUR  
City-St-Zip: QUQBEC, CANADA J5ZP4,

Title: V ( ) Delete  
Name: SAVNER, DAVID A  
Address: 2941 FAIRVIEW PARK DRIVE, SUITE 100  
City-St-Zip: FALLS CHURCH, VA 22042

Title: S ( ) Delete  
Name: DAMERON, DEL S  
Address: 11399 16TH COURT NORTH, SUITE 200  
City-St-Zip: ST. PETERSBURG, FL 33716

Title: T ( ) Delete  
Name: FOGG, DAVID H  
Address: 2941 FAIRVIEW PARK DRIVE, SUITE 100  
City-St-Zip: FALLS CHURCH, CA 22042

Title: D ( ) Delete  
Name: HALL, CHARLES M  
Address: 2941 FAIRVIEW PARK DRIVE, SUITE 100  
City-St-Zip: FALLS CHURCH, CA 22042

Title: T ( ) Delete  
Name: VON SEELEN, RICHARD K ASST-T  
Address: 2941 FAIRVIEW PARK DRIVE, SUITE 100  
City-St-Zip: FALLS CHURCH, CA 22042

**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:

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: DEL S. DAMERON

S

04/01/2009

Electronic Signature of Signing Officer or Director

Date