

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002089

Entity Name: KRATOS SOUTHEAST, INC.

FILED
Sep 22, 2011
Secretary of State

Current Principal Place of Business:

4820 EASTGATE MALL
SAN DIEGO, CA 92121

New Principal Place of Business:

4820 EASTGATE MALL
SUITE 200
SAN DIEGO, CA 92121

Current Mailing Address:

4820 EASTGATE MALL
SAN DIEGO, CA 92121

New Mailing Address:

4820 EASTGATE MALL
SUITE 200
SAN DIEGO, CA 92121

FEI Number: 58-1885960

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: DP
Name: DEMARCO, ERIC M
Address: 4820 EASTGATE MALL
City-St-Zip: SAN DIEGO, CA 92121

Title: DVP
Name: LUND, DEANNA H
Address: 4820 EASTGATE MALL
City-St-Zip: SAN DIEGO, CA 92121

Title: DTVP
Name: SIEGAL, LAURA L
Address: 4820 EASTGATE MALL
City-St-Zip: SAN DIEGO, CA 92121

Title: AS
Name: LAKE, EDWARD
Address: 4820 EASTGATE MALL
City-St-Zip: SAN DIEGO, CA 92121

Title: VP
Name: FINK, MICHAEL
Address: 4820 EASTGATE MALL
City-St-Zip: SAN DIEGO, CA 92121

Title: S
Name: BUTERA, DEBORAH S
Address: 4820 EASTGATE MALL
City-St-Zip: SAN DIEGO, CA 92121

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: DEBORAH S. BUTERA

S

09/22/2011

Electronic Signature of Signing Officer or Director

_____ Date