2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# F88610

Entity Name: DRS TACTICAL SYSTEMS GLOBAL SERVICES, INC.

Current Principal Place of Business:

1110 W. HIBISCUS BLVD
MELBOURNE, FL 32901 US

New Principal Place of Business:

Current Mailing Address:

5 SYLVAN WAY
PARSIPPANY, NJ 07054 US

New Mailing Address:

FEI Number: 59-2209179 **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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SHEEHAN, MICHAEL
Address: 7600 WISCONSIN AVE, SUITE 1000
City-St-Zip: BETHESDA, MD 20814

Title: TD ( ) Delete
Name: SCHNEIDER, RICHARD A
Address: 5 SYLVAN WAY
City-St-Zip: PARSIPPANY, NJ 07054

Title: SD ( ) Delete
Name: LASERSON DUNN, NINA
Address: 5 SYLVAN WAY
City-St-Zip: PARSIPPANY, NJ 07054

Title: VPT ( ) Delete
Name: RINSKY, JASON
Address: 5 SYLVAN WAY
City-St-Zip: PARSIPPANY, NJ 07054

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SINN, JERRY
Address: 2345 CRYSTAL DRIVE, SUITE 915
City-St-Zip: ARLINGTON, VA 22202

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: D ( ) Change (X) Addition
Name: NEWMAN, MARK S
Address: 1501 NORTHPOINT PARKWAY, SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33407

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: JASON RINSKY VPT 04/28/2009

Electronic Signature of Signing Officer or Director Date