



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90560 024 ***150.00

DOCUMENT # F95000004620 1. Entity Name GENERAL DYNAMICS SYSTEMS DEVELOPMENT AND INTEGRATION SERVICES, INC.					
Principal Place of Business 10560 ARROWHEAD DR. FAIRFAX, VA 22030			Mailing Address 11166 MAIN ST SUITE 200 FAIRFAX, VA 22030		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address <i>1421 Jefferson Davis Hwy</i> Suite, Apt. #, etc. <i>Suite 600</i>			
City & State		City & State <i>Arlington, VA</i>		02282005 Chg-P CR2E034 (10/03)	
Zip		Zip <i>22202</i>		4. FEI Number 95-3032229	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEWART, JOHN F 1421 JEFFERSON DAVIS HWY STE 600 ARLINGTON, VA 22202	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Von Thuer, Lon 1421 Jefferson Davis Hwy, Ste 600 Arlington, VA 22202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOUSE, MARGARET N 3190 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Charles Ernest Edgar, IV 1421 Jefferson Davis Hwy, Ste 600 Arlington, VA 22202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FOGG, DAVID H 3190 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GALANIS, RICHARD J 1421 JEFFERSON DAVIS HWY STE 600 ARLINGTON, VA 22202	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KAUFFMAN, MICHAEL W 1421 JEFFERSON DAVIS HWY STE 600 ARLINGTON, VA 22202	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANCUSO, MICHAEL J 3190 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>C. Ernest Edgar IV</i> C. ERNEST EDGAR IV 15 APRIL 2005 (703) 271-3464 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> ASSISTANT SECRETARY					