

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

065745
AT

1002

FILED

03 JAN 17 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # F95000005006

1. Entity Name
RESEARCH PLANNING, INC.



Principal Place of Business
**6400 ARLINGTON BLVD., #1100
FALLS CHURCH VA 22042**

Mailing Address
**C/O TITAN CORP.
3033 SCIENCE PARK ROAD
SAN DIEGO CA 92121**

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **54-1441003**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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 *Lynette Coleman* **Lynette Coleman as its agent** **1/17/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$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	CD RAY, GENE W 3033 SCIENCE PARK RD. SAN DIEGO CA 92121 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500010199625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEMARCO, ERIC M 3033 SCIENCE PARK RD. SAN DIEGO CA 92121 <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	SVP SOPP, MARK W 3033 SCIENCE PARK RD. SAN DIEGO CA 92121 <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	CFOT SOPP, MARK W 3033 SCIENCE PARK RD. SAN DIEGO CA 92121 <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 PAIGE, MICHAEL 3033 SCIENCE PARK RD. SAN DIEGO CA 92121 <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	S BARR, CHERYL L 3033 SCIENCE PARK RD. SAN DIEGO CA 92121 <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: CHERYL L BARR, SECRETARY **1-14-03** **858-552-9500**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/02)



2612

CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 896551 4388080

AUTHORIZATION : *Patricia Pizant*

COST LIMIT : \$ 150.00

ORDER DATE : January 17, 2003

ORDER TIME : 11:31 AM

ORDER NO. : 896551-020

CUSTOMER NO: 4388080

CUSTOMER: Mr. Michael Kirker
The Titan Corporation
3033 Science Park Rd.

San Diego, CA 92121

RECEIVED
03 JAN 17 PM 2:36
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: RESEARCH PLANNING, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Parramore - Ext. 1147

EXAMINER'S INITIALS:

[Handwritten signature]