

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F96000003853

**FILED**  
**Jul 16, 2009**  
**Secretary of State****Entity Name:** FLORIDA-ASE, INC.**Current Principal Place of Business:**8283 GREENSBORO DRIVE  
MCLEAN, VA 22102**New Principal Place of Business:****Current Mailing Address:**8283 GREENSBORO DRIVE  
MCLEAN, VA 22102**New Mailing Address:****FEI Number:** 22-3271700**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**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ALDRICH, DAVID  
Address: 8283 GREENSBORO DR.  
City-St-Zip: MCLEAN, VA 22102

Title: D ( ) Delete  
Name: APPLEBY, C.G.  
Address: 8283 GREENSBORO DR.  
City-St-Zip: MCLEAN, VA 22102

Title: V ( ) Delete  
Name: FRANCIS, HENRY  
Address: 8283 GREENBORO DRIVE  
City-St-Zip: MC LEAN, VA 22102

Title: S ( ) Delete  
Name: DOUGLAS, MANYA  
Address: 8283 GREENBORO DRIVE  
City-St-Zip: MC LEAN, VA 22102

Title: D ( ) Delete  
Name: SHARDER, RALPH  
Address: 8283 GREENBORO DRIVE  
City-St-Zip: MC LEAN, VA 22102

Title: D ( ) Delete  
Name: STRICKLAND, SAMUEL  
Address: 8283 GREENBORO DRIVE  
City-St-Zip: MC LEAN, VA 22102

**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:** DOUGLAS MANYA

S

07/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date