

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F96000004115

Entity Name: BAE SYSTEMS AH INC.

FILED
Feb 20, 2008
Secretary of State

Current Principal Place of Business:

13386 INTERNATIONAL PARKWAY
JACKSONVILLE, FL 32218

New Principal Place of Business:

1525 WILSON BLVD
SUITE 700
ARLINGTON, VA 22209

Current Mailing Address:

13850 MCLEAREN ROAD
HERNDON, VA 20171

New Mailing Address:

FEI Number: 59-3392443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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: D () Delete
Name: HAVENSTEIN, WALTER P
Address: 1601 RESEARCH BLVD
City-St-Zip: ROCKVILLE, MD 20850

Title: DVAS () Delete
Name: CHESTON, SHEILA C
Address: 1601 RESEARCH BLVD
City-St-Zip: ROCKVILLE, MD 20850

Title: AS () Delete
Name: COBB, PAUL W JR.
Address: 1601 RESEARCH BLVD
City-St-Zip: HERNDON, VA 20850

Title: VPS () Delete
Name: BAKER, D. MARK
Address: 1525 WILSON BLVD #700
City-St-Zip: ARLINGTON, VA 22209

Title: VPT () Delete
Name: SLACK, GARY C
Address: 1525 WILSON BLVD, #700
City-St-Zip: ARLINGTON, VA 22209

Title: P () Delete
Name: HUDSON, LINDA
Address: 1525 WILSON BLVD #700
City-St-Zip: ARLINGTON, VA 22209

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
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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: PAUL W. COBB, JR.

AS

02/20/2008

Electronic Signature of Signing Officer or Director

Date