**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # F96000004434

NORTHROP GRUMMAN FIELD SUPPORT SERVICES, INC.

Principal Place of Business	Mailing Address	***************************************
1840 CENTURY PARK E LOS ANGELES CA 90067	1840 CENTURY PARK E LOS ANGELES CA 90067	
2. Principal Place of Business	2a. Mailing Address	

**FILED** 

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90020 036 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

08/28/1996

21   Suite, Apt.		26			95-4589656	Not Applica
!	#, etc.	Suite, Apt. #, etc.		y	5. Certificate of Status Desired	
22		27				
City & Stat	te	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current year	•
24	25	29	30	•	Personal Property Tax.	☐ Yes ☐ No
24]	9. Name and Address of Curren	11	1001		10. Name and Address of New Register	ed Agent
	v. panie and Address of Carren	t Hogistorea Agent		81 Name		
T O	CORPORATION SYSTEM		Į			
- •	SOUTH PINE ISLAND ROAD			82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	NTATION FL 33324					
rusi	MIATION FE 33324		' ]	83		
			ł	84 City		85 Zip Code
					-	·L
11. Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida Statu	tes, the ab	ove-named co	orporation submits this statement for the purpose	of changing its register
office or r	registered agent, or both, in the State (	of Florida. Such change was a	authorized	by the corpora	ation's board of directors. I hereby accept the ap	pointment as registered
agent. I a	am familiar with, and accept the obligat	Juns 01, Section 607.0505, Fit	ภเนล 5เสเน	ites.		
SIGNATURE		A and all a Market Market	E: Basistand	Ament signah um sogs	uired when reinstating) DATE	
12.	Signature, typed or printed name of registered agen	D DIRECTORS	13.	when skinstne ted	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	
TITLE	DP CHIOLING PAR	5 DELETE	1.1 TIT	IF T	D	☐ Change 🛣 Ad
NAME	BOYER, BRIAN E		1.2 NA		AUFFREY, LAWRENCE A.	_ , _
			ı		1840 CENTURY PARK EAST	
STREET ADDRESS			1	REET ADDRESS		
CITY-ST-ZIP	LOS ANGELES CA 90067	(X DELETE	_	Y-ST-ZIP	LOS ANGELES, CA. 90067	☐ Change 🕱 Add
TITLE	D	(A) DELETE	2.1 TIT	(	D	□ Citalige , Mar Au
NAME	WILSON, JOSEPH JR		2.2 NA		JACKSON, PETER	
				REET ADDRESS		
STREET ADDRESS	10.00 0		2.3 STI	NEE! ADDRESS	1840 CENTURY PARK EAST	
STREET ADDRESS	1840 CENTURY PARK E LOS ANGELES CA 90067	. —————————————————————————————————————	- '2.4 CI	TY-ST-ZIP	1840 CENTURY PARK EAST LOS_ANGELES, CA. 90067	
	1	<b>⊠</b> DELETE		TY-ST-ZIP		☐ Change ※ Ad
CITY-ST-ZIP	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E	<b>™</b> DELETE	- '2.4 CI	TŸ-ST- <b>ZI</b> P	LOS ANGELES, CA. 90067 TREASURER	☐ Change 图 Ad
CITY-ST-ZIP	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E	<b>⊠</b> DELETE	2.4 CF 3.1 TIT 3.2 NA	TŸ-ST- <b>ZI</b> P	LOS ANGELES, CA. 90067 TREASURER MYERS, ALBERT F.	☐ Change 图 Ad
CITY-ST-ZIP TITLE NAME	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E	·	2.4 Cf 3.1 TIT 3.2 NA 3.3 ST	TŸ-ST-ZIP LE ME	LOS ANGELES, CA. 90067 TREASURER MYERS, ALBERT F. 1840 CENTURY PARK EAST	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E 1840 CENTURY PARK E	☐ DELETE	2.4 Cf 3.1 TIT 3.2 NA 3.3 ST	TÝ-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP	LOS ANGELES, CA. 90067 TREASURER MYERS, ALBERT F.	☐ Change
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E 1840 CENTURY PARK E LOS ANGELES CA 90067	·	2.4 CF 3.1 TIT 3.2 NAI 3.3 STF 3.4. CF	TY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP	TREASURER MYERS, ALBERT F. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 ASSISTANT TREASURER	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E 1840 CENTURY PARK E LOS ANGELES CA 90067  COO SACHS, EDWARD P	·	2.4 CF 3.1 TIT 3.2 NAI 3.3 STF 3.4 CF 4.1 TIT 4.2 NA	TY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP	LOS ANGELES, CA. 90067 TREASURER MYERS, ALBERT F. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 ASSISTANT TREASURER ROTH, ALAN M.	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E 1840 CENTURY PARK E LOS ANGELES CA 90067  COO SACHS, EDWARD P	·	2. 4 Cf 3.1 TIT 3.2 NAI 3.3 STF 3.4. Cf 4.1 TIT 4. 2 NAI 4.3 STF	TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE	TREASURER MYERS, ALBERT F. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 ASSISTANT TREASURER ROTH, ALAN M. 1840 CENTURY PARK EAST	
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E 1840 CENTURY PARK E LOS ANGELES CA 90067  COO SACHS, EDWARD P 1840 CENTURY PARK E LOS ANGELES CA 90067  CFO FERRARO, CHARLES 1840 CENTURY PARK E LOS ANGELES CA 90067  S JOHNSON, JAMES C	☐ DELETE	2.4 C/I 3.1 TIT 3.2 NA 3.3 STI 3.4 C/I 4.1 TIT 4.2 NA 4.3 STI 4.4 C/I 5.1 TIT 5.2 NA 5.3 STI 5.4 C/I 6.1 TIT 62 NA	TY-ST-ZIP  LE  MIE  REET ADDRESS  TY-ST-ZIP  LE  MIE  REET ADDRESS  Y-ST-ZIP  LE	TREASURER MYERS, ALBERT F. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 ASSISTANT TREASURER ROTH, ALAN M. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 ASSISTANT TREASURER STRODE, DAVID H. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 SECRETARY MULLAN, JOHN H.	□ Change ☑ Adi
CITY-ST-ZIP TITLE NAME STREET ADDRESS	LOS ANGELES CA 90067  D SCHWARZ, ROBERT E 1840 CENTURY PARK E LOS ANGELES CA 90067  COO SACHS, EDWARD P 1840 CENTURY PARK E LOS ANGELES CA 90067  CFO FERRARO, CHARLES 1840 CENTURY PARK E LOS ANGELES CA 90067  S JOHNSON, JAMES C 1840 CENTURY PARK E	☐ DELETE  ☐ DELETE	2.4 CT 3.1 TIT 3.2 NA 3.3 STF 3.4 CT 4.1 TIT 4.2 NA 4.3 STI 4.4 CT 5.1 TIT 5.2 NA 5.3 STT 5.4 CIT 6.1 TIT 6.2 NA 6.3 STI	TY-ST-ZIP  LE  ME REET ADDRESS  TY-ST-ZIP  LE  WE REET ADDRESS  Y-ST-ZIP  LE  ME REET ADDRESS  Y-ST-ZIP  LE  ME REET ADDRESS	TREASURER MYERS, ALBERT F. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 ASSISTANT TREASURER ROTH, ALAN M. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 ASSISTANT TREASURER STRODE, DAVID H. 1840 CENTURY PARK EAST LOS ANGELES, CA. 90067 SECRETARY	☐ Change

officer or director of the corporation or the receiver or thystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.