

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006289

FILED  
May 07, 2009  
Secretary of State

Entity Name: ROLLS-ROYCE NAVAL MARINE INC.

## Current Principal Place of Business:

110 NORFOLK ST.  
WALPOLE, MA 02081

## New Principal Place of Business:

## Current Mailing Address:

14850 CONFERENCE CENTER DR.  
SUITE 100  
CHANTILLY, VA 20151

## New Mailing Address:

1875 EXPLORER ST.  
SUITE 200  
RESTON, VA 20190

FEI Number: 04-2236767

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: GUYETTE, JAMES M  
Address: 14850 CONFERENCE CENTER DR.  
City-St-Zip: CHANTILLY, VA 20151

Title: CFO ( ) Delete  
Name: POWERS, WILLIAM T III  
Address: 14850 CONFERENCE CTR. DR.  
City-St-Zip: CHANTILLY, AV 20151

Title: P ( ) Delete  
Name: MARSH, ANDREW  
Address: 110 NORFOLK ST  
City-St-Zip: WALPOLE, MA 020811798

Title: S ( ) Delete  
Name: SULLIVAN, MARY S  
Address: 14850 CONFERENCE CENTER DR.  
City-St-Zip: CHANTILLY, VA 20151

Title: VP ( ) Delete  
Name: CIKANOVICH, CHRISTOPHER  
Address: 14850 CONFERENCE CENTER DR.  
City-St-Zip: CHANTILLY, VA 20151

Title: VP ( ) Delete  
Name: D'APRILE, PIER  
Address: 110 NORFOLK ST.  
City-St-Zip: WALPOLE, MA 02081

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GUYETTE, JAMES M  
Address: 1875 EXPLORER ST., SUITE 200  
City-St-Zip: RESTON, VA 20190

Title: CFO (X) Change ( ) Addition  
Name: POWERS, WILLIAM T III  
Address: 1875 EXPLORER ST., SUITE 200  
City-St-Zip: RESTON, VA 20190

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: SULLIVAN, MARY S  
Address: 1875 EXPLORER ST., SUITE 200  
City-St-Zip: RESTON, VA 20190

Title: VP (X) Change ( ) Addition  
Name: CIKANOVICH, CHRISTOPHER  
Address: 1875 EXPLORER ST., SUITE 200  
City-St-Zip: RESTON, VA 20190

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: MARY S. SULLIVAN

SEC

05/07/2009

Electronic Signature of Signing Officer or Director

Date