## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## F9700000523 (7) DOCUMENT #

**BDM INTERNATIONAL, INC.** 

MCLEAN VA 22102

FAULDERS, C T #

MCLEAN VA 22102

HOOVER, WILLIAM C

MCLEAN VA 22102

SWEENEY, WILLIAM E DR JR

1501 BDM WAY

**1501 BDM WAY** 

**1501 BDM WAY** 

MCLEAN VA 22102

CITY-ST-ZIP

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

City-S1-ZIP

TITLE NAME

TITLE

NAME

TITLE

NAME

Principal Place of Business Mailing Address 1501 BDM WAY 1501 BDM WAY MCLEAN VA 22102 MCLEAN VA 22102 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/30/1997 2. Principal Place of Business 2a. Mailing Address 4. FFI Number Applied For Not Applicable 26 54-1561881 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered against and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 11 TITLE Change ☐ Addition TITLE CARLUCCI, FRANK C 12 NAME NAME **1501 BDM WAY** STREET ADORESS 1.3 STREET ADDRESS MCLEAN VA 22102 CITY-ST-ZIP 1.4 CITY - ST - ZIP **X** DELETE 2.1 TITLE Change Addition NAME CONWAY, WILLIAM E JR 2.2 NAME STREET ADDRESS 1501 BDM WAY 2.3 STREET ADDRESS CITY-ST-ZIP MCLEAN VA 22102 2.4 CITY-ST-ZIP DELETE Change Addition **PCEO** TITLE 3.1 TITLE ODEEN, PHILIP A NAME 3.2 NAME **1501 BDM WAY** STREET ADDRESS 3.3 STREET ADDRESS

14. 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 annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

3.4. CITY-ST-ZIP

4.3 STREET ADORESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

4.4 CITY - ST - ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

Wh Bull Jax Differt Kathryn M. JohnBull 4/29/98 703-848-5000

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CR2E034

Addition

Addition

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Change

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**FILED** 

May 13 1998 8:00am

Secretary of State