

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002256

FILED
Apr 03, 2009
Secretary of State

Entity Name: DELEX SYSTEMS, INCORPORATED

Current Principal Place of Business:

1953 GALLOWS ROAD STE 700
VIENNA, VA 221823991

New Principal Place of Business:

Current Mailing Address:

1953 GALLOWS ROAD STE 700
VIENNA, VA 221823991

New Mailing Address:

FEI Number: 54-0836954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, JOHN B
105 LAGOON FOREST DRIVE
PONTE VEDRA BEACH, FL 32082 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: C () Delete
Name: PIPER, H L
Address: 2609 STIRRUP LANE
City-St-Zip: ALEXANDRIA, VA 22308

Title: D () Delete
Name: LAUNEY, REUEL O III
Address: 4737 34TH ST
City-St-Zip: ARLINGTON, VA 22207

Title: D () Delete
Name: SHELTON, PAUL J
Address: 11000 OAKTON WOODS WAY
City-St-Zip: OAKTON, VA 22124

Title: S () Delete
Name: BENSING, DONALD R
Address: 3014 HARITAGE FARM COURT
City-St-Zip: HERNDON, VA 22071

Title: D () Delete
Name: BESTE, FREDERICK J III
Address: 1191 JACOBURG RD
City-St-Zip: WIND GAP, PA 18091

Title: P () Delete
Name: DRISCOLL, EDMUND F II
Address: 3206 NAVY DRIVE
City-St-Zip: HERNDON, VA 20171

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: DONALD R. BENSING

SR V

04/03/2009

Electronic Signature of Signing Officer or Director

_____ Date