

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000005782

1. Entity Name

MANTECH TELECOMMUNICATIONS AND INFORMATION SYSTE

**FILED**  
**Apr 05, 2001 8:00 am**  
**Secretary of State**

04-05-2001 90050 047 \*\*\*150.00

Principal Place of Business

12015 LEE JACKSON HWY  
FAIRFAX VA 22033-3300

Mailing Address

12015 LEE JACKSON HWY  
FAIRFAX VA 22033-3300

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 52-1279373

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C ☐ Delete  
NAME PEDERSEN, GEORGE J  
STREET ADDRESS 12015 LEE JACKSON HWY  
CITY-ST-ZIP FAIRFAX VA 22033-3300

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE STD ☐ Delete  
NAME MOORE, JOHN A JR  
STREET ADDRESS 12015 LEE JACKSON HWY  
CITY-ST-ZIP FAIRFAX VA 22033-3300

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME PORTER, STEPHEN W  
STREET ADDRESS 1200 NEW HAMPSHIRE AVE NW  
CITY-ST-ZIP WASHINGTON DC 20036

TITLE Director ☒ Change ☐ Addition  
NAME Porter, Stephen W  
STREET ADDRESS 12015 Lee Jackson Hwy, Suite 128  
CITY-ST-ZIP Fairfax, VA 22033-3300

TITLE D ☐ Delete  
NAME GOLDEN, MICHAEL D  
STREET ADDRESS 901 15TH ST NW  
CITY-ST-ZIP WASHINGTON DC 20005-2301

TITLE Director ☒ Change ☐ Addition  
NAME Golden, Michael D  
STREET ADDRESS 12015 Lee Jackson Hwy, Suite 128  
CITY-ST-ZIP Fairfax, VA 22033-3300

TITLE D ☐ Delete  
NAME VAUGHAN, WALTER W  
STREET ADDRESS 13985 HOLLY FORREST DR  
CITY-ST-ZIP MANASSAS VA 20112-3866

TITLE Assistant Secretary ☒ Change ☐ Addition  
NAME Lancaster, Christine A  
STREET ADDRESS 12015 Lee Jackson Hwy, Suite 128  
CITY-ST-ZIP Fairfax, VA 22033-3300

TITLE P ☐ Delete  
NAME RENZI, EUGENE C  
STREET ADDRESS 14119-A SULLYFIELD CIRCLE  
CITY-ST-ZIP CHANTILLY VA 20151

TITLE President ☒ Change ☐ Addition  
NAME Renzi, Eugene C  
STREET ADDRESS 12015 Lee Jackson Hwy, Suite 128  
CITY-ST-ZIP Fairfax, VA 22033-3300

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/09/01

(703)218-6000

Date

Daytime Phone #

CR2E034 (10/00)