

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005936

FILED
Jan 16, 2007
Secretary of State

Entity Name: L-3 COMMUNICATIONS GOVERNMENT SERVICES, INC.

Current Principal Place of Business:

3750 CENTERVIEW DR.
CHANTILLY, VA 20151

New Principal Place of Business:

Current Mailing Address:

3750 CENTERVIEW DRIVE
CHANTILLY, VA 20151

New Mailing Address:

FEI Number: 54-1349668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: VUONO, CARL E GENERAL
Address: 3750 CENTERVIEW DRIVE
City-St-Zip: CHANTILLY, VA 20151

Title: VD () Delete
Name: CAMBRIA, CHRISTOPHER C
Address: 600 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10016

Title: CEO () Delete
Name: LANZA, FRANK C
Address: 600 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10016

Title: D () Delete
Name: CAMBRIA, CHRISTOPHER C
Address: 600 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10016

Title: VP () Delete
Name: GOLDSTEIN, KENNETH R
Address: 600 THIRD AVE
City-St-Zip: NEW YORK, NY 10016

Title: T () Delete
Name: SOUZA, STEPHEN
Address: 600 THIRD AVE
City-St-Zip: NEW YORK, NY 10016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: CEO (X) Change () Addition
Name: STRIANESE, MICHAEL
Address: 600 THIRD AVENUE
City-St-Zip: NEW YORK, NY 10016

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

Title: VP (X) Change () Addition
Name: VANBLERKOM, LAWRENCE
Address: 600 THIRD AVE
City-St-Zip: NEW YORK, NY 10016

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LAWRENCE VANBLERKOM

VP

01/16/2007

Electronic Signature of Signing Officer or Director

Date