## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M01000000730

Entity Name: ALLIANT AMMUNITION SYSTEMS COMPANY LLC

FILED Apr 21, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

TWIN CITIES ARMY AMMUNITION PLANT RADFORD ARMY AMMUNITION PLANT

ROUTE 114, PO BOX 1 BLDG. 104 NEW BRIGHTON, MN 55112 RADFORD, VA 241430100 US

**Current Mailing Address: New Mailing Address:** 

ATTN: DICK POWELL 5050 LINCOLN DRIVE

MINNEAPOLIS, MN 554361097 US

FEI Number: 41-1955360 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

MGR Title: () Change () Addition () Delete RANGEN, ERIC S Name: Name:

5050 LINCOLN DRIVE Address: Address: City-St-Zip: EDINA, MN 554361097 City-St-Zip:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition Name: DAVIDSON, ANN D Name: ROSS, KEITH D

Address: 5050 LINCOLN DRIVE Address: 5050 LINCOLN DRIVE City-St-Zip: EDINA, MN 554361097 City-St-Zip: EDINA, MN 554361097

Title: MGR () Delete Title: MGR (X) Change ( ) Addition

VLAHAKIS, NICHOLAS G Name: VLAHAKIS, NICHOLAS G Name: 5050 LINCOLN DRIVE Address: Address: 5050 LINCOLN DRIVE City-St-Zip: EDINA, MN 55436 City-St-Zip: EDINA, MN 554361097

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KEITH D. ROSS 04/21/2005