

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004336

FILED
Jan 06, 2012
Secretary of State

Entity Name: BAE SYSTEMS SOUTHEAST SHIPYARDS MAYPORT LLC

Current Principal Place of Business:

8500 HECKSCHER DRIVE
JACKSONVILLE, FL 32226

New Principal Place of Business:

Current Mailing Address:

13850 MCLEAREN ROAD
C/O SYLVIA LACY-CROW
HERNDON, VA 20171

New Mailing Address:

FEI Number: 59-1050964

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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: GRAHAM, IAN T
Address: 1101 WILSON BLVD
City-St-Zip: ARLINGTON, VA 22209

Title: MGR
Name: JACOBS, BRADLEY W
Address: 1101 WILSON BLVD
City-St-Zip: ARLINGTON, VA 22209

Title: AS
Name: DEVLIN, CHRIS
Address: 750 WEST BERKLEY AVE
City-St-Zip: NORFOLK, VA 23523-103

Title: VPT
Name: MARINUCCI, JOHN
Address: 1801 RESEARCH BLVD
City-St-Zip: ROCKVILLE, MD 20850

Title: P
Name: HERR, DAVID A
Address: 1801 RESEARCH BLVD
City-St-Zip: ROCKVILLE, MD 20850

Title: VPS
Name: COLEMAN, DOUGLAS
Address: 1801 RESEARCH BLVD
City-St-Zip: ROCKVILLE, MD 20850

I hereby 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: IAN T. GRAHAM

MGR

01/06/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date