

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000002099

Entity Name: NIGHT VISION SYSTEMS, LLC

FILED  
Apr 17, 2012  
Secretary of State

## Current Principal Place of Business:

100 BABCOCK ST.  
MELBOURNE, FL 32901

## New Principal Place of Business:

100 BABCOCK ST.  
MELBOURNE, FL 32935

## Current Mailing Address:

5 SYLVAN WAY  
PARSIPPANY, NJ 07054

## New Mailing Address:

FEI Number: 11-3684395

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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: MGRM  
Name: DRS TECHNOLOGIES, INC.  
Address: 5 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: PRES  
Name: MURPHY, TERENCE  
Address: P.O. BOX 740188  
City-St-Zip: DALLAS, TX 75374

Title: VPOP  
Name: RUSSO, ROBERT  
Address: 5 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: VPT  
Name: RINSKY, JASON VP/TAX  
Address: 5 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: SECY  
Name: DORFMAN, MARK A  
Address: 5 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: TRES  
Name: SCHNEIDER, RICHARD A  
Address: 5 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

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: JASON RINSKY

VPT

04/17/2012

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