2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M95456

Apr 24, 2009 Secretary of State

Entity Name: INTERFACE AND CONTROL SYSTEMS INC.

Current Principal Place of Business: New Principal Place of Business: 8830 STANFORD BLVD COLUMBIA, MD 21045 US **Current Mailing Address: New Mailing Address:** 4300 FAIR LAKES CT FAIRFAX, VA 22033 US FEI Number: 59-2906895 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 C/O C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: DCFO (X) Change () Addition VANGAASBECK, JAMES SLOANE, STANTON Name: Name: 452 SANDY KEY 4300 FAIR LAKES CT Address: Address: City-St-Zip: MELBOURNE BEACH, FL 32951 City-St-Zip: FAIRFAX, VA 22033 Title: Title: () Delete DSEC (X) Change () Addition BUCKLEY, BRIAN Name: Name: SCHULTZ, MARK 100 BLUE GRANITE COURT 4300 FAIR LAKES CT Address: Address: CHAPEL HILL, NC City-St-Zip: City-St-Zip: FAIRFAX, VA 22033 Title: (X) Change () Addition Title: () Delete DCOO OFFUT, JOSHUA ATKIN, TIMOTHY Name: Name: 11912 WHISPERING OAKS CT 4300 FAIR LAKES CT Address: Address: City-St-Zip: REISTERSTOWN, MD 21136 City-St-Zip: FAIRFAX, VA 22033 Title: () Delete Title: () Change (X) Addition BURGUM, MELISSA Name: Name: Address: Address: 4300 FAIR LAKES CT City-St-Zip: City-St-Zip: FAIRFAX, VA 22033 Title: Title: () Change (X) Addition () Delete MUTRYN, DAVID Name: Name: Address: Address: 4300 FAIR LAKES CT City-St-Zip: City-St-Zip: FAIRFAX, VA 22033

I hereby certify that the information supplied with this filing does not qualify 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: MELISSA BURGUM Τ 04/24/2009