

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000069280

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**Entity Name:** GTEC CYBER SOLUTIONS, INC.

**Current Principal Place of Business:**

1501 FARM CREDIT DR STE 2300  
MCLEAN, VA 221025011

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324

**New Mailing Address:**

**FEI Number:** 76-0701619

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HILLEN, JOHN  
Address: 1501 FARM CREDIT DRIVE  
City-St-Zip: MCLEAN, VA 221025501

Title: CFO  
Name: CORMIER, JOE  
Address: 1501 FARM CREDIT DRIVE  
City-St-Zip: MCLEAN, VA 22102

Title: VP  
Name: BROOME, LISA  
Address: 1501 FARM CREDIT DRIVE  
City-St-Zip: MCLEAN, VA 22102

Title: VP  
Name: KISSNER, KEVIN  
Address: 400 SAGNER AVENUE STE 100  
City-St-Zip: FREDERICK, MD 21701

I hereby 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 all other like empowered.

SIGNATURE: KEVIN KISSNER

VP

03/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date