

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P11003** (1)

1. Corporation Name

MANTECH MATHEMATICS CORPORATION



Principal Place of Business

Mailing Address

**12015 LEE JACKSON HWY
STE 128
FAIRFAX VA 22033
US**

**12015 LEE JACKSON HWY STE 128
STE 128
FAIRFAX VA 22033
US**

3. Date Incorporated or Qualified

08/01/1986

3a. Date of Last Report

05/01/1995

4. FEI Number

52-1396246

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and the corporation)

(Printed Name of Registered Agent and the corporation)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	CROMWELL, MICHAEL J. I	
STREET ADDRESS	12015 LEE JACKSON HWY STE 128	
CITY-STATE-ZIP	FAIRFAX VA	
TITLE	D	☒ DELETE
NAME	ENGLE, H JOSEPH	
STREET ADDRESS	12015 LEE JACKSON HWY SUITE 128	
CITY-STATE-ZIP	FAIRFAX VA	
TITLE	D	☐ DELETE
NAME	VAUGHAN, WALTER	
STREET ADDRESS	12015 LEE JACKSON HWY - STE 128	
CITY-STATE-ZIP	FAIRFAX VA	
TITLE	SD	☐ DELETE
NAME	MOORE, JOHN A JR	
STREET ADDRESS	12015 LEE JACKSON HW 128	
CITY-STATE-ZIP	FAIRFAX VA	
TITLE	PDT	☐ DELETE
NAME	PEDERSEN, GEORGE J.	
STREET ADDRESS	12015 LEE JACKSON HW 128	
CITY-STATE-ZIP	FAIRFAX VA	
TITLE	AS	☐ DELETE
NAME	FREE, JO-ANN J	
STREET ADDRESS	12015 LEE JACKSON HW 128	
CITY-STATE-ZIP	FAIRFAX VA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director	☐ Change ☒ Addition
1.2 NAME	Michael D. Golden, Esq.	
1.3 STREET ADDRESS	12015 Lee Jackson Highway, Suite 128	
1.4 CITY-STATE-ZIP	Fairfax, VA 22033	
2.1 TITLE	Director	☐ Change ☒ Addition
2.2 NAME	Stephen W. Porter, Esq.	
2.3 STREET ADDRESS	12015 Lee Jackson Highway, Suite 128	
2.4 CITY-STATE-ZIP	Fairfax, VA 22033	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the registered trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Jo-An J. Free) 425-96

(703) 268-6000

CR2E034 (12/95)