## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P23645

Entity Name: LOCKHEED MARTIN TECHNICAL SERVICES, INC.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
2339 ROUTE 70 WEST CHERRY HILL, NJ 080023315						
Current Mailing Address:			New Maili	New Mailing Address:		
2339 ROUTE 70 WEST CHERRY HILL, NJ 080023315				P.O. BOX 8048 BLDG 100 RMU4632 PHILADELPHIA, PA 19101		
FEI Number:	52-1592547	FEI Number Applied For ( ) FEI Nu	ımber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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		
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () I GOODEN, LINDA 700 N. FREDERI GAITHERSBURG	CK AVE	Title: Name: Address: City-St-Zip:	P (X) 0 GOODEN, LINDA 700 N. FREDERI GAITHERSBURG	CK AVE	
Title: Name: Address: City-St-Zip:	S () [ MURRAY, NEAL 2339 ROUTE 70 CHERRY HILL, N	WEST	Title: Name: Address: City-St-Zip:	S/D (X) O MURRAY, NEAL 700 N. FREDERI GAITHERSBURG	CK AVE	
Title: Name: Address: City-St-Zip:	T () E MEARKLE, CONI 6801 ROCKLEDO BETHESDA, MD	GE DRIVE	Title: Name: Address: City-St-Zip:	T (X) 0 MCCARTHY, JOH 6801 ROCKLEDO BETHESDA, MD	GE DRIVE	
Title: Name: Address: City-St-Zip:	AS () [ GARWOOD, GEO 2339 RT P WES CHERRY HILL, N	ORGE L T	Title: Name: Address: City-St-Zip:	AS (X) O MARTIN, DONLA 230 MALL BLVD KING OF PRUSS		
Title: Name: Address: City-St-Zip:	AS ()[ GOLDSTEIN, STI 6801 ROCKLEDO BETHESDA, MD	GE DRIVE	Title: Name: Address: City-St-Zip:	VP (X) O MACLAUCHLAN, 700 N. FREDERI GAITHERSBURG	CK AVE	

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: DONALD P MARTIN AS 05/01/2009