2000 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE:

FILED DOCUMENT # **P33577** Apr 27, 2000 8:00 am Secretary of State 1. Entity Name GRUMMAN SYSTEMS SUPORT CORPORATION 1-27-2000 90032 020 ***150.00 Mailing Address Principal Place of Business 814 W. DIAMOND AVENUE 814 W. DIAMOND AVENUE 3RD FLOOR. SUITE 350 3RD FLOOR. SUITE 350 **GAITHERSBURG MD 20878 GAITHERSBURG MD 20878** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 52-0997829 Not Applicable \$8.75_Additional_ Zip Country Zip Country 5: Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 8. 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE Change ☐ Addition ☐ Delete TITLE MULDERIG, JOSEPH P NAME NAME STREET ADDRESS 10 ORVILLE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOHEMIA NY** Surebary Delete Addition TITI F TITLE JOHNSON, JAMES C NAME NAME Century Park West STREET ADDRESS 1840 CENTURY PARK EAST STREET ADDRESS CA 900G LOS ANGELES CA 90067 CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE MOVIUS, STEPHEN C. NAME NAME STREET ADDRESS 2411 DULLES CORNER PRK STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HERNDON VA ☐ Change ☐ Addition ☐ Delete TITLE TITLE TAYLOR, HUGH E NAME NAME STREET ADDRESS STREET ADDRESS 814 W. DIAMOND AVENUE #350 CITY-ST-ZIP **GAITHERSBURG MD 20878** CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-00

Date

Daytime Phone #