

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000022415

FILED
May 27, 2009
Secretary of State**Entity Name:** L-3 COMMUNICATIONS EO/IR, INC.**Current Principal Place of Business:**1443 GENERAL AVIATION DR
HANGER 11
MELBOURNE, FL 32935**New Principal Place of Business:**420 AVIATION BLVD
SUITE 101
SANTA ROSA, CA 95403**Current Mailing Address:**C/O L-3 COMMUNICATIONS CORPORATION
600 THIRD AV
NEW YORK, NY 10016**New Mailing Address:****FEI Number:** 59-3316817 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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: P () Delete
Name: DEHNE, JOHN
Address: 649 NORTH SERVICE ROAD WEST
City-St-Zip: BURLINGTON ONTARIO CANADA, CN L7P5B9 US

Title: DVS () Delete
Name: STEVEN, POST
Address: 600 THIRD AVE
City-St-Zip: NEW YORK, NY 10016 US

Title: CCEO () Delete
Name: STRIANESE, MICHAEL T
Address: 600 THIRD AVE
City-St-Zip: NEW YORK, NY 10016 US

Title: CFO () Delete
Name: DAMBROSIO, RALPH
Address: 600 THIRD AVE
City-St-Zip: NEW YORK, NY 10016 US

Title: VT () Delete
Name: SOUZA, STEPHEN M
Address: 600 THIRD AVE
City-St-Zip: NEW YORK, NY 10016 US

Title: VP () Delete
Name: VAN BLERKOM, LAWRENCE
Address: 600 THIRD AVE
City-St-Zip: NEW YORK, NY 10016 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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City-St-Zip:

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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LAWRENCE VAN BLERKOM

VP

05/27/2009

Electronic Signature of Signing Officer or Director_____
Date