

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008088

FILED  
Mar 13, 2007  
Secretary of State

Entity Name: DRS TACTICAL SYSTEMS, INC.

**Current Principal Place of Business:**

3520 US HWY 1 NE  
PALM BAY, FL 32905

**New Principal Place of Business:**

**Current Mailing Address:**

5 SYLVAN WAY  
PARSIPPANY, NJ 07054

**New Mailing Address:**

FEI Number: 58-2487888      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCNEIGHT, RICHARD P  
Address: 3520 US HWY 1 NE  
City-St-Zip: PALM BAY, FL 32905

Title: T ( ) Delete  
Name: SCHNEIDER, RICHARD A  
Address: 5 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: S/D ( ) Delete  
Name: DUNN, NINA L  
Address: 5 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

Title: D ( ) Delete  
Name: NEWMAN, MARK S  
Address: 1501 NORTHPOINT PKW, STE 104  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SHEEHAN, MICHAEL  
Address: 7600 WISCONSIN AVENUE, SUITE 1000  
City-St-Zip: BETHESDA, MD 20814

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

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

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

Title: VPT ( ) Change (X) Addition  
Name: RINSKY, JASON  
Address: 5 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 07054

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON RINSKY

VPT

03/13/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date