

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 830961

**Entity Name:** BOOZ ALLEN HAMILTON INC.**Current Principal Place of Business:**8283 GREENSBORO DRIVE  
MCLEAN, VA 22102**Current Mailing Address:**8283 GREENSBORO DRIVE  
MCLEAN, VA 22102 US**FEI Number:** 36-2513626**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title DIRECTOR  
Name ROSSOTTI, CHARLES O.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title PRESIDENT / DIRECTOR  
Name ROZANSKI, HORACIO D.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR  
Name SHRADER, RALPH W.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR  
Name ODEEN, PHILIP A.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR  
Name MCCLAIN, GRETCHEN W.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title SECRETARY  
Name LABEN, NANCY J.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR  
Name JOHNSON, ARTHUR E.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title TREASURER  
Name HOWELL, LLOYD W. JR.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

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*I hereby 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 all other like empowered.*

**SIGNATURE: NANCY J. LABEN****SECRETARY****04/03/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GAUMOND, MARK E.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR  
Name CLARE, PETER J.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR  
Name AMBLE, JOAN LORDI C.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR  
Name FUJIYAMA, IAN I.  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102

Title DIRECTOR  
Name BARNES, MELODY C  
Address 8283 GREENSBORO DRIVE  
City-State-Zip: MCLEAN VA 22102