

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003775

Entity Name: CACI SYSTEMS, INC.

Current Principal Place of Business:

1100 N. GLEBE RD.
ARLINGTON, VA 22201

Current Mailing Address:

1100 N. GLEBE RD.
ARLINGTON, VA 22201

FEI Number: 54-0965315

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 D
Name LONDON, J PHILLIP
Address 1100 N GLEBE RD
City-State-Zip: ARLINGTON VA 22201

Title P
Name ALLEN, DAN
Address 1100 N GLEBE RD
City-State-Zip: ARLINGTON VA 22201

Title VP
Name FOLKMAN, MICHAEL T
Address 1100 N GLEBE RD
City-State-Zip: ARLINGTON VA 22201

Title S
Name MORSE, ARNOLD D
Address 1100 N GLEBE RD
City-State-Zip: ARLINGTON VA 22201

Title T
Name MUTRYN, THOMAS A
Address 1100 N GLEBE RD
City-State-Zip: ARLINGTON VA 22201

Title D
Name PHILLIPS, WARREN R
Address 2850 DAISY RD
City-State-Zip: WOODBINE MD 21797

Title CEO
Name COFONI , PAUL M.
Address 1100 N. GLEBE RD.
City-State-Zip: ARLINGTON VA 22201

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: MICHAEL T. FOLKMAN

VICE PRESIDENT

04/24/2014

Electronic Signature of Signing Officer/Director Detail

Date