

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000004743

**FILED**  
**Jul 12, 2022**  
**Secretary of State**  
**3708143006CC**

**Entity Name:** BWXT TECHNICAL SERVICES GROUP, INC.

**Current Principal Place of Business:**

2016 MOUNT ATHOS ROAD  
LYNCHBURG, VA 24504-5447

**Current Mailing Address:**

2016 MOUNT ATHOS ROAD  
LYNCHBURG, VA 24504-5447 US

**FEI Number:** 54-1606233

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH 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 ASSISTANT SECRETARY  
Name TAYLOR, THERESA B.  
Address 2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447

Title TREASURER  
Name KUBBS, KIRT J  
Address 2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447

Title VP  
Name KERR, JASON S.  
Address 2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447

Title PRESIDENT  
Name DUKES, HEATHERLY H.  
Address 2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447

Title VP  
Name BARTH, MARK  
Address 2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447

Title CORPORATE SECRETARY  
Name ALAN, MATTHEW  
Address 2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447

Title DIRECTOR  
Name MCCABE, THOMAS E.  
Address 2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447

Title DIRECTOR  
Name GEVEDEN, REX D.  
Address 2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447

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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:** THERESA B. TAYLOR

**ASSISTANT SECRETARY** 07/12/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           BLACK, DAVID S.  
Address        2016 MOUNT ATHOS ROAD  
City-State-Zip: LYNCHBURG VA 24504-5447