

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25046

Entity Name: LOCKHEED MARTIN ENGINEERING & SCIENCES COMPANY**Current Principal Place of Business:**700 N FREDERICK AVE
GAITHERSBURG, MD 20879**Current Mailing Address:**PO BOX 61511
BLDG 100, RM U4632
KING OF PRUSSIA, PA 19406 US**FEI Number:** 95-3424436**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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	P/D
Name	BARBOUR, SONDRAL
Address	700 N FREDERICK AVE
City-State-Zip:	GAITHERSBURG MD 20879

Title	V/T
Name	POSSENRIEDE, KENNETH R
Address	6801 ROCKLEDGE DR
City-State-Zip:	BETHESDA MD 20817

Title	VP/D
Name	STANISLAV, MARTIN T
Address	700 N FREDERICK AVE
City-State-Zip:	GAITHERSBURG MD 20879

Title	AS
Name	ALLEN, KATHY L
Address	6801 ROCKLEDGE DR
City-State-Zip:	BETHESDA MD 20817

Title	VP/S/D
Name	MACKAY, SCOTT W
Address	700 N FREDERICK AVE
City-State-Zip:	GAITHERSBURG MD 20879

Title	AS
Name	MARTIN, DONALD P
Address	230 MALL BLVD
City-State-Zip:	KING OF PRUSSIA PA 19406

Title	VP/D
Name	LEWIS, PATRICIA L
Address	700 N FREDERICK AVE
City-State-Zip:	GAITHERSBURG MD 20879

Title	AS
Name	CORDERO, MARITZA
Address	6801 ROCKLEDGE DR
City-State-Zip:	BETHESDA MD 20817

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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: DONALD P MARTIN**ASSISTANT SECRETARY** 01/16/2014_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title AS
Name COLE, GLENN E
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817

Title AT
Name WHITNEY, RENA H
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817

Title DIRECTOR
Name SHREWSBURY, JUNE
Address 9301 SKYLINE RD
City-State-Zip: DALLAS TX 75243

Title AS
Name EMENS, CHRISTINA
Address 230 MALL BLVD
City-State-Zip: KING OF PRUSSIA PA 19406

Title AS
Name HEYWOOD, DAVID A
Address 6801 ROCKLEDGE DR
City-State-Zip: BETHESDA MD 20817