FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **857636** **(5)**

1. Corporation Name

HALIFAX ENGINEERING, INC.

Principal Place of Business

5250 CHEROKEE AVE.
ALEXANDRIA VA 22312-2052

Mailing Address

5250 CHEROKEE AVE.
ALEXANDRIA VA 22312-2052

3. Date Incorporated or Qualified: **09/06/1983**

3a. Date of Last Report: **02/28/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **54-0829246** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature of a member of the board of directors or authorized officer NOTE: Registered Agent signature required when filing DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	MILLS, HOWARD C.	
STREET ADDRESS	ROUTE 1	
CITY-ST-ZIP	BROAD RUN VA	
TITLE	SD	☐ DELETE
NAME	RUFFNER, ERNEST L.	
STREET ADDRESS	2346 S. NASH ST.	
CITY-ST-ZIP	ARLINGTON VA	
TITLE	VT	☐ DELETE
NAME	SMITHSON, RICHARD J.	
STREET ADDRESS	3 CREEK COURT	
CITY-ST-ZIP	WHITE PLAINS MD	
TITLE	D	☐ DELETE
NAME	GROVER, JOHN, H	
STREET ADDRESS	2339 49TH ST NW	
CITY-ST-ZIP	WASHINGTON DC	
TITLE	DC	☐ DELETE
NAME	SCURLOCK, ARCH C.	
STREET ADDRESS	1753 ARMY-NAVY DR.	
CITY-ST-ZIP	ARLINGTON VA	
TITLE	C	☐ DELETE
NAME	MORRELL, DONALD, R	
STREET ADDRESS	RT 4	
CITY-ST-ZIP	LEESBURG VA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard J. Smithson, VP/Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 24, 1996
Date

(703)750-2202
Daytime Phone #