2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003623

Entity Name: EADS NORTH AMERICA DEFENSE COMPANY

FILED Aug 31, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business	••
)•
1910 ASSOCIATION DRIVE 1616 NORTH FT. MYER DRIVE SUITE 201 SUITE 1500	
RESTON, VA 201911502 ARLINGTON, VA 22209 US	
Current Mailing Address: New Mailing Address:	
1910 ASSOCIATION DRIVE 1616 NORTH FT. MYER DRIVE	
SUITE 201 SUITE 1500 RESTON, VA 201911502 ARLINGTON, VA 22209 US	
	e of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Regis	stered Agent:
C T 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 rein the State of Florida.	gistered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent)ate
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS:
Title: D () Delete Title: CEO (X) Change (Name: CLERC-RENAUD, PIERRE Name: OLIVER, DAVID) Addition
Address: 815 CONNECTICUT AVE., NW, SUITE 700 Address: 1616 NORTH FORT MYER City-St-Zip: WASHINGTON, DC 20006 City-St-Zip: ARLINGTON, VA 22209	DRIVE, 1500
Title: CEOP () Delete Title: CFO (X) Change () Addition
Name: MULATO, JAMES F Name: MALONE, STEPHEN Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: 1616 NORTH FT. MYER DR	RIVE 1500
City-St-Zip: RESTON, VA 20191 City-St-Zip: ARLINGTON, VA 22209	1102, 1000
Title: CFO () Delete Title: D (X) Change () Addition
Name: MAXWELL, WILLIAM O Name: YARBOROUGH, WILLIAM O Address: 1910 ASSOCIATION DRIVE SUITE 201 Address: PO BOX 828	
Name: MAXWELL, WILLIAM O Address: 1910 ASSOCIATION DRIVE, SUITE 201 City-St-Zip: RESTON, VA 20191 Name: YARBOROUGH, WILLIAM O Address: PO BOX 828 City-St-Zip: MCLEAN, VA 22101	
Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: PO BOX 828 City-St-Zip: RESTON, VA 20191 City-St-Zip: MCLEAN, VA 22101 Title: D () Delete Title: () Change (G
Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: PO BOX 828 City-St-Zip: City-St-Zip: D () Delete Title: Name: COLEMAN, GLENN Title: Name: Name: PO BOX 828 MCLEAN, VA 22101	G
Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: PO BOX 828 City-St-Zip: RESTON, VA 20191 City-St-Zip: MCLEAN, VA 22101 Title: D () Delete Title: () Change (G
Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: PO BOX 828 City-St-Zip: RESTON, VA 20191 City-St-Zip: MCLEAN, VA 22101 Title: D () Delete Title: () Change (Name: COLEMAN, GLENN Name: Address: Address: 413 W. PALM VALLEY DRIVE Address: City-St-Zip: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: () Change (G) Addition
Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: PO BOX 828 City-St-Zip: RESTON, VA 20191 City-St-Zip: MCLEAN, VA 22101 Title: D () Delete Title: () Change (Name: COLEMAN, GLENN Name: Address: City-St-Zip: City-St-Zip: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: City-St-Zip: () Change (Title: D () Delete Title: () Change (Name: MONIS, RICHARD J Name:	G) Addition
Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: PO BOX 828 City-St-Zip: RESTON, VA 20191 City-St-Zip: MCLEAN, VA 22101 Title: D () Delete Title: () Change (Name: COLEMAN, GLENN Name: Address: Address: 413 W. PALM VALLEY DRIVE Address: City-St-Zip: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: () Change (G) Addition
Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: PO BOX 828 City-St-Zip: RESTON, VA 20191 City-St-Zip: MCLEAN, VA 22101 Title: D () Delete Title: () Change () Change () Change () City-St-Zip: Address: 413 W. PALM VALLEY DRIVE Address: City-St-Zip: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: D () Delete Title: () Change () Change () City-St-Zip: Address: 4208 HAMMERSMITH DRIVE Address: City-St-Zip: City-St-Zip: Title: D () Delete Title: D (X) Change ()	G) Addition) Addition
Address: 1910 ASSOCIATION DRIVE, SUITE 201 Address: PO BOX 828 City-St-Zip: RESTON, VA 20191 City-St-Zip: MCLEAN, VA 22101 Title: D () Delete Title: () Change () Change () Change () City-St-Zip: Address: 413 W. PALM VALLEY DRIVE Address: City-St-Zip: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: () Change () Chang	G) Addition) Addition) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DENNIS J BURNETT VP 08/31/2005