

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001257

FILED  
Apr 04, 2011  
Secretary of State

**Entity Name:** EADS NA DEFENSE SECURITY AND SYSTEMS SOLUTIONS, INC.

**Current Principal Place of Business:**

70 NE LOOP 410 SUITE 400  
SAN ANTONIO, TX 78216

**New Principal Place of Business:**

**Current Mailing Address:**

70 NE LOOP 410 SUITE 400  
SAN ANTONIO, TX 78216

**New Mailing Address:**

FEI Number: 74-2909737

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: RONALD, MOORE E  
Address: 70 NE LOOP 410 SUITE 400  
City-St-Zip: SAN ANTONIO, TX 78216

Title: TREA  
Name: BONITA, FOSTER J  
Address: 70 NE LOOP 410 SUITE 400  
City-St-Zip: SAN ANTONIO, TX 78216

Title: SEC  
Name: VAZQUEZ, GILBERT F  
Address: 70 NE LOOP 410 SUITE 400  
City-St-Zip: SAN ANTONIO, TX 78216

Title: DIR  
Name: DAN, WOLF  
Address: 70 NE LOOP 410 SUITE 400  
City-St-Zip: SAN ANTONIO, TX 78216

Title: DIR  
Name: DON, GOFF  
Address: 70 NE LOOP 410 SUITE 400  
City-St-Zip: SAN ANTONIO, TX 78216

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: RONALD E MOORE

PRES

04/04/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date