## **2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000002141

**Entity Name: DRS C3 & AVIATION COMPANY** 

**Current Principal Place of Business:** 

1 MILESTONE CENTER CT GERMANTOWN, MD 20876

**Current Mailing Address:** 

5 SYLVAN WAY

3RD FL., ATTN: DAVID CAMIOLO PARSIPPANY, NJ 07054 US

FEI Number: 26-4736646 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

**FILED** Apr 12, 2019

**Secretary of State** 

3930599044CC

Officer/Director Detail:

Title **DIRECTOR** Title ASST. SECRETARY

Name LYNN, WILLIAM J III Name KREBEL, KATHERINE A

Address 2345 CRYSTAL DRIVE Address 201 EVANS LANE

**SUITE 1000** 

ST. LOUIS MO 63121 City-State-Zip: City-State-Zip: ARLINGTON VA 22202

DIRECTOR, SECRETARY Title Title **PRESIDENT** 

Name DORFMAN, MARK A Name BAYLOUNY, JOHN A Address 2345 CRYSTAL DRIVE

2345 CRYSTAL DRIVE Address **SUITE 1000** 

**SUITE 1000** 

City-State-Zip: ARLINGTON VA 22202 City-State-Zip: ARLINGTON VA 22202

Title **TREASURER** Title VP, TAXATION

Name DIPPOLD, MICHAEL Name RINSKY, JASON

Address 2345 CRYSTAL DRIVE Address 5 SYLVAN WAY **SUITE 1000** 

City-State-Zip: ARLINGTON VA 22202 City-State-Zip: PARSIPPANY NJ 07054

Title

Name CORTESE, STEVEN J 2345 CRYSTAL DRIVE Address City-State-Zip: ARLINGTON VA 22202

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.

**VP TAXATION** 04/12/2019 SIGNATURE: JASON RINSKY

Electronic Signature of Signing Officer/Director Detail

Date