2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F20000005368

Entity Name: BAE SYSTEMS ORDNANCE SYSTEMS INC.

Current Principal Place of Business:

4509 WEST STONE DRIVE KINGSPORT, TN 37660-9982

Current Mailing Address:

4509 WEST STONE DRIVE KINGSPORT, TN 37660-9982 US

FEI Number: 54-1892491

Name and Address of Current Registered Agent:

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

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	PRESIDENT	Title	VP, SECRETARY
Name	TONDREAULT, JEREMY P	Name	MILLER II, JOHN
Address	4509 WEST STONE DRIVE	Address	4509 WEST STONE DRIVE
City-State-Zip:	KINGSPORT TN 37660-9982	City-State-Zip:	KINGSPORT TN 37660-9982
Title	DIRECTOR	Title	VP, TREASURER
Name	ELDRIDGE, ALICE M.	Name	ROHS, TIMOTHY D
Address	4509 WEST STONE DRIVE	Address	4509 WEST STONE DRIVE
City-State-Zip:	KINGSPORT TN 37660-9982	City-State-Zip:	KINGSPORT TN 37660-9982
Title	VP	Title	DIRECTOR
Title Name	VP BROWN, KATHERINE H.	Title Name	DIRECTOR HOWAT, D. SCOTT
Name	BROWN, KATHERINE H.	Name	HOWAT, D. SCOTT
Name Address City-State-Zip:	BROWN, KATHERINE H. 4509 WEST STONE DRIVE KINGSPORT TN 37660-9982	Name Address	HOWAT, D. SCOTT 4509 WEST STONE DRIVE
Name Address City-State-Zip: Title	BROWN, KATHERINE H. 4509 WEST STONE DRIVE KINGSPORT TN 37660-9982 VP	Name Address City-State-Zip:	HOWAT, D. SCOTT 4509 WEST STONE DRIVE KINGSPORT TN 37660-9982
Name Address City-State-Zip: Title Name	BROWN, KATHERINE H. 4509 WEST STONE DRIVE KINGSPORT TN 37660-9982 VP ARSENEAULT, THOMAS A.	Name Address City-State-Zip: Title	HOWAT, D. SCOTT 4509 WEST STONE DRIVE KINGSPORT TN 37660-9982 VP
Name Address City-State-Zip: Title	BROWN, KATHERINE H. 4509 WEST STONE DRIVE KINGSPORT TN 37660-9982 VP	Name Address City-State-Zip: Title Name	HOWAT, D. SCOTT 4509 WEST STONE DRIVE KINGSPORT TN 37660-9982 VP MURPHY, MICHELLE

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: MILLER II, JOHN

SECRETARY

03/28/2022

Electronic Signature of Signing Officer/Director Detail

Date

Date