2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000001328

Entity Name: TERRAN ORBITAL CORPORATION

Current Principal Place of Business:

6800 BROKEN SOUND PARKWAY NW

SUITE 200

BOCA RATON, FL 33487

Current Mailing Address:

6800 BROKEN SOUND PARKWAY NW

SUITE 200

BOCA RATON, FL 33487 US

FEI Number: 47-3509064 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 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

Officer/Director Detail:

Title CHAIRMAN, CEO, PRESIDENT Title VP, DIRECTOR

Name BELL, MARC Name PREVITE, ANTHONY

Address 6800 BROKEN SOUND PKWY STE 200 Address 6800 BROKEN SOUND PKWY STE 200

City-State-Zip: BOCA RATON FL 33434 City-State-Zip: BOCA RATON FL 33434

Title CHAIRMAN, DIRECTOR Title DIRECTOR

Name STATON, DANIEL C Name RAABERG, DOUG

Address 6800 BROKEN SOUND PARKWAY NW Address 6800 BROKEN SOUND PARKWAY NW

SUITE 200

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

Title CFO, TREASURER Title GENERAL COUNSEL, SECRETARY

Name HOBART, GARY Name BLACK, JAMES

Address 6800 BROKEN SOUND PARKWAY NW Address 6800 BROKEN SOUND PARKWAY NW

SUITE 200 SUITE 200

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

 Title
 DIRECTOR
 Title
 CONTROLLER

 Name
 LACHANCE, JAMES
 Name
 RIFFEL, MATHIEU

Address 6800 BROKEN SOUND PARKWAY NW Address 6800 BROKEN SOUND PARKWAY NW

SUITE 200

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

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SUITE 200

SUITE 200

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: JAMES BLACK SECRETARY 03/10/2023

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 10, 2023

Secretary of State

4666228893CC

Officer/Director Detail Continued:

 Title
 DIRECTOR
 Title
 INDEPENDENT DIRECTOR

 Name
 NEWTON III, RICHARD Y
 Name
 SCLAVOS, STRATTON

Address 6800 BROKEN SOUND PARKWAY NW Address 6800 BROKEN SOUND PARKWAY NW

SUITE 200 SUITE 200

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 PETROCELLI, TOBI
 Name
 MANION, TOM

Address 6800 BROKEN SOUND PARKWAY NW Address 6800 BROKEN SOUND PARKWAY NW

SUITE 200 SUITE 200

City-State-Zip: BOCA RATON FL 33487 City-State-Zip: BOCA RATON FL 33487