

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

0000543

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90172 035 ***150.00

DOCUMENT # F96000002394

1. Corporation Name
~~TASC SYSTEMS ENGINEERING CORPORATION~~
Litton Adesso Software, Inc.

Principal Place of Business Mailing Address
55 WALKERS BROOK DR 55 WALKERS BROOK DR
READING MA 01867 READING MA 01867



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		05/09/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		04-3310728	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip Country		Zip Country		5. Certificate of Status Desired <input type="checkbox"/>	
24		29		30	
				\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	
				8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HINEMAN, EVANS R	1.2 NAME	Hineman, Evans R
STREET ADDRESS	55 WALKERS BROOK-DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	READING MA 01867	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRESTON, JOHN E	2.2 NAME	
STREET ADDRESS	21240 BURBANK BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	WOODLAND HILLS CA 91367	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, JEANETTE M	3.2 NAME	
STREET ADDRESS	21240 BURBANK BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WOODLAND HILLS CA 91367	3.4 CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOKE, LAWRENCE	4.2 NAME	Kilderleeve, Mark
STREET ADDRESS	21240 BURBANK BLVD.	4.3 STREET ADDRESS	55 Walkers Brook Drive
CITY-ST-ZIP	WOODLAND HILLS CA 91367	4.4 CITY-ST-ZIP	Reading, MA 01867
TITLE	AC <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRAMONT, JOHN	5.2 NAME	Asst. Treasurer
STREET ADDRESS	55 WALKERS BROOK-DRIVE	5.3 STREET ADDRESS	Stone, Kenneth M.
CITY-ST-ZIP	READING MA 01867	5.4 CITY-ST-ZIP	55 Walkers Brook Drive
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAULSON, TIMOTHY G	6.2 NAME	
STREET ADDRESS	21240 BURBANK BLVD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	WOODLAND HILLS 91 367	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE _____ Date 4/14/99 Daytime Phone # 781-942-2000

CR2E034 (1/98)