

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P21651 (5)

1. Corporation Name
CACI SYSTEMS INTEGRATION INC.



Principal Place of Business: **1100 N. GLEBE ROAD ARLINGTON VA 22201**
Mailing Address: **1100 N. GLEBE ROAD ARLINGTON VA 22201**

3. Date Incorporated or Qualified: **11/07/1988**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **54-1008368**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 State, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 State, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

81 Name: _____
82 Street Address (P.O. Box Number is Not Acceptable): _____
83 _____
84 City: _____ FL 85 Zip Code: _____

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 607.0502, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

| | | |
|----------------|------------------------------|--|
| TITLE | CMD | <input type="checkbox"/> DELETE |
| NAME | LONDON, JACK P. | |
| STREET ADDRESS | 1100 N. GLEBE ROAD | |
| CITY-ST-ZIP | ARLINGTON VA | |
| TITLE | SVPS | <input type="checkbox"/> DELETE |
| NAME | ELEFANTE, JEFFREY | |
| STREET ADDRESS | 1100 N. GLEBE ROAD | |
| CITY-ST-ZIP | ARLINGTON VA | |
| TITLE | SVP | <input type="checkbox"/> DELETE |
| NAME | CLANCY, W. | |
| STREET ADDRESS | 1100 N. GLEBE ROAD | |
| CITY-ST-ZIP | ARLINGTON VA | |
| TITLE | EVP | <input type="checkbox"/> DELETE |
| NAME | BRADFORD, GREGORY H. | |
| STREET ADDRESS | 1100 N. GLEBE ROAD | |
| CITY-ST-ZIP | ARLINGTON VA | |
| TITLE | EVPT | <input checked="" type="checkbox"/> DELETE |
| NAME | STRICKLAND, SAMUEL R. | |
| STREET ADDRESS | 1100 N. GLEBE ROAD | |
| CITY-ST-ZIP | ARLINGTON VA | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|-------------------|---|--|
| 11 TITLE | CHIEF FINANCIAL OFFICER / | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME | CHAIRMAN OF THE BOARD / DIRECTOR | |
| 13 STREET ADDRESS | | |
| 14 CITY-ST-ZIP | | |
| 21 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 22 NAME | | |
| 23 STREET ADDRESS | | |
| 24 CITY-ST-ZIP | | |
| 31 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 32 NAME | | |
| 33 STREET ADDRESS | | |
| 34 CITY-ST-ZIP | | |
| 41 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 42 NAME | | |
| 43 STREET ADDRESS | | |
| 44 CITY-ST-ZIP | | |
| 51 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 52 NAME | | |
| 53 STREET ADDRESS | | |
| 54 CITY-ST-ZIP | | |
| 61 TITLE | PRESIDENT | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 62 NAME | RAYMOND J. OLESON | |
| 63 STREET ADDRESS | 1100 NORTH GLEBE ROAD | |
| 64 CITY-ST-ZIP | ARLINGTON, VA 22201 | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(k), 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 amendment with an address.

SIGNATURE: *William J. Clancy* **WILLIAM J. CLANCY** **FEBRUARY 7, 1996** (703) 841-7800

CR2E034 (12/95)

CAI Systems Integration Inc
EIN: 54-1008368

06-Feb-98

DIRECTORS

| <u>Name</u> | <u>Social Security No.</u> | <u>Address</u> |
|--------------------|----------------------------|--|
| J. Phillip London | 445-32-2767 | 1100 North Glebe Road Arlington, VA 22201 |
| Warren R. Phillips | 350-34-1202 | 2850 Daisy Road Woodbine, MD 21797 |

OFFICERS

| <u>Title</u> | <u>Name</u> | <u>Social Security No.</u> | <u>Address</u> |
|--|---------------------|----------------------------|--|
| Chairman of the Board | J. Phillip London | 445-32-2767 | 1100 North Glebe Road Arlington, VA 22201 |
| President | Raymond J. Oleson | 472-48-7244 | 1100 North Glebe Road Arlington, VA 22201 |
| Chief Financial Officer (Acting | J. Phillip London | 445-32-2767 | 1100 North Glebe Road Arlington, VA 22201 |
| Executive Vice President | Gregory R. Bradford | 560-68-2171 | 27 Balmuir Gardens, Putney London SW15, 6NG England |
| Senior Vice President | William J. Clancy | 451-50-3529 | 1100 North Glebe Road Arlington, VA 22201 |
| Senior Vice President and Secretary | Jeffrey P. Elefante | 143-36-1314 | 1100 North Glebe Road Arlington, VA 22201 |
| Assistant Secretary | Arnold D. Morse | 093-40-4440 | 1100 North Glebe Road Arlington, VA 22201 |

Directors serve one year terms and are elected at the annual shareholders meeting or until their successors are elected. Officers are appointed by and serve at the pleasure of the Board of Directors.