FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1-2

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P28182** **(4)**

1. Corporation Name

AEGIS RESEARCH CORPORATION

Principal Place of Business	Mailing Address
1735 N. LYNN STREET SUITE 500 ARLINGTON VA 22209	1735 N. LYNN STREET SUITE 500 ARLINGTON VA 22209

3. Date Incorporated or Qualified: 02/14/1990
3a. Date of Last Report: 05/01/1995

4. FEI Number: 54-1395845 ☐ Applied For ☐ Not Applicable

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	2a. Mailing Address
21 7799 Leesburg Pike	26 7799 Leesburg Pike
Suite, Apt. #, etc. 22 Suite 1100 North	Suite, Apt. #, etc. 27 Suite 1100 North
City & State 23 Falls Church VA	City & State 28 Falls Church VA
Zip 24 22043 Country 25 USA	Zip 29 22043 Country 30 USA

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 607.0505, Florida Statutes.

*SIGNATURE _____ DATE
Signature, type or print name of registered agent (if other than officer) (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	☐ DELETE	1 1 TITLE		☐ Change ☐ Addition
NAME	RIDEOUR, HARRY P.		1 2 NAME		
STREET ADDRESS	1735 N LYNN ST #500		1 3 STREET ADDRESS		
CITY-ST-ZIP	ARLINGTON VA		1 4 CITY-ST-ZIP	SEE	
TITLE	V	☒ DELETE	2 1 TITLE	ATTACHED	☐ Change ☐ Addition
NAME	HOFMANN, FREDERICK L.		2 2 NAME		
STREET ADDRESS	1735 N. LYNN ST., #500		2 3 STREET ADDRESS		
CITY-ST-ZIP	ARLINGTON VA		2 4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME	GEIGER, LEE ANNE F.		3 2 NAME		
STREET ADDRESS	1735 N. LYNN ST., #500		3 3 STREET ADDRESS		
CITY-ST-ZIP	ARLINGTON VA		3 4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME	ROBERTS, LYDIA D		4 2 NAME		
STREET ADDRESS	1735 N. LYNN ST., #500		4 3 STREET ADDRESS		
CITY-ST-ZIP	ARLINGTON VA		4 4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME	KINGSLEY, DONALD M		5 2 NAME	100001865521	
STREET ADDRESS	1735 N. LYNN ST., #500		5 3 STREET ADDRESS	-06/18/96--01116--007	
CITY-ST-ZIP	ARLINGTON VA		5 4 CITY-ST-ZIP	***200.00	
TITLE	V	☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME	HUFFSTUTLER, ROBERT M.		6 2 NAME		
STREET ADDRESS	1735 N. LYNN ST. #500		6 3 STREET ADDRESS		
CITY-ST-ZIP	ARLINGTON VA		6 4 CITY-ST-ZIP		

5/15/96

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 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.

SIGNATURE: _____ HARRY P. RIDEOUR JR 6/4/96 703 610 9263
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

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FLORIDA DEPARTMENT OF STATE
ATTACHMENT TO
1996 CORPORTION ANNUAL REPORT

AEGIS RESEARCH CORPORATION

BLOCK 13

PLEASE NOTE: THE PRESIDENT, WILLIAM H. GEIGER, LISTED BELOW IS NOT NEW BUT WAS OMITTED FROM THE PREPRINTED FORM FOR 1995.

TITLE	P/D
NAME	GEIGER, WILLIAM H.
STREET ADDRESS	7799 LEESBURG PIKE
CITY, ST	FALLS CHURCH, VA

ADDITION

TITLE	V
NAME	MONAGHAN , THOMAS O.
STREET ADDRESS	7799 LEESBURG PIKE
CITY, ST	FALLS CHURCH, VA

CHANGE

PLEASE CHANGE THE STREET ADDRESS, CITY, ST AND ZIP CODE TO THE FOLLOWING FOR ALL THE OFFICERS AND DIRECTORS LISTED IN BLOCK 12.

7799 LEESBURG PIKE
FALLS CHURCH, VA