**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

# DOCUMENT # P28182

**AEGIS RESEARCH CORPORATION** 

# FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90052 006 \*\*\*150.00



Principal Place of Business Mailing Address					1 (881) 881 148 11881 1841 1841 1841 1841 1					
799 LEESBURG PIKE 7799 LEESBURG PIKE										
SUITE 1100 NORTH	SUITE 1100 NORTH	_								
FALLS CHURCH VA 22043	FALLS CHURCH VA 22043				DO NOT WRITE IN THIS SPACE					
					3.	Date Incorporated or Qualifed				
					1	02/14/1990				
	1.0							1		
2. Principal Place of Business	2a. Mailing Address				1	FEI Number	L	Applied For		
21	26					54-1395845	$\bot$	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.					T.		\$8.	75 Additional		
22	27				) J.	Certificate of Status Desired	Fe	ee Required		
City & State	City & State	City & State			6.	Election Campaign Financing	\$5	.00 May Be		
23	28				1	Trust Fund Contribution		Ided to Fees		
Zip Country	Zip				8.	This corporation owes the current year Ir	ntangible			
24 25	29	30				Personal Property Tax.	∐ Yes	4000		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
			81	Name						
CT CORPORATION SYSTEM										
1200 S. PINE ISLAND ROAD			82	82 Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324										
FEMILIATION FE 33324			83							
			84	City			85	Zip Code		
			-	,		Fi	_   ~	,		
11. Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida	Statutes, the a	bove	e-named corpo	oration	submits this statement for the purpose of	f changir	ng its registered		

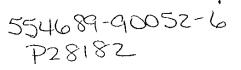
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered

agent. I am ramiliar with, and accept the obligations of, Section 607.0505, Fibrida Statutes.												
SIGNATURE	Signature, typed or printed name of registered agent and title if a	policable /NOTE: Re	egistered Agent signature re	equired when reinstating)	DATE							
12.	OFFICERS AND DIREC		13.		FICERS AND DIRECTORS IN 12							
TITLE	V	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition						
NAME	RIDEOUR, HARRY P.		1.2 NAME									
STREET ADORESS	7799 LEESBURG PIKE #1100 N		1.3 STREET ADDRESS									
CITY-ST-ZIP	FALLS CHURCH VA 22043		1.4 CITY-ST-ZIP									
TITLE	PD	☐ DELETE	2.1 TITLE		Change	Addition						
NAME	GEIGER, WILLIAM H		2.2 NAME									
STREET ADDRESS	779 LEESBURG PIKE #1100 N		2.3 STREET ADDRESS									
CITY-ST-ZIP	FALLS CHURCH VA 22043		2. 4 CITY-ST-ZIP									
TITLE	S	☐ DELETE	3.1 TITLE		Change	☐ Addition						
NAME	GEIGER, LEE ANNE F.		3.2 NAME			j						
STREET ADDRESS	7799 LEESBURG PIKE #1100 N		3.3 STREET ADDRESS			Ì						
CITY-ST-ZIP	FALLS CHURCH VA 22043		3.4. CITY-ST-ZIP									
TITLE	V	□ DELETE	4.1 TAILE		☐ Change	Addition						
NAME	HUFFSTUTLER, ROBERT M.		4. 2 NAME									
STREET ADDRESS	7799 LEESBURG PIKE #1100 N		4.3 STREET ADDRESS									
CITY-ST-ZIP	FALLS CHURCH VA 22043		4.4 CITY-ST-ZIP									
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition						
NAME			5.2 NAME									
STREET ADDRESS			5.3 STREET ADDRESS									
CITY-ST-ZIP			5.4 CITY-ST-ZIP									
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition						
NAME			6.2 NAME									
STREET ADDRESS			6.3 STREET ADDRESS									
CITY-ST-ZIP			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 emplemental 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 appear of the corporation of the corporation of the receiver of trustee empowered.

SIGNATURE:

## FLORIDA DEPARTMENT OF STATE ATTACHMENT TO 1999 CORPORATION ANNUAL REPORT



# AEGIS RESEARCH CORPORATION FEDERAL ID # 54-1395845

### **BLOCK 13**

## ADDITIONAL OFFICER NAME AND ADDRESS

TITLE VICE PRESIDENT NAME FLOYD ALVAREZ

STREET ADDRESS 7799 LEESBURG PIKE, STE. #1100 NORTH

CITY, STATE FALLS CHURCH, VA. 22043

TITLE VICE PRESIDENT NAME GARY DORLAND

STREET ADDRESS 7799 LEESBURG PIKE, STE. #1100 NORTH

CITY, STATE FALLS CHURCH, VA. 22043

TITLE VICE PRESIDENT NAME KEVIN GALLAGHER

STREET ADDRESS 7799 LEESBURG PIKE, STE. #1100 NORTH

CITY, STATE FALLS CHURCH, VA. 22043

TITLE VICE PRESIDENT NAME GEORGE GIBSON

STREET ADDRESS 7799 LEESBURG PIKE, STE. #1100 NORTH

CITY, STATE FALLS CHURCH, VA. 22043

TITLE VICE PRESIDENT NAME EDMUND GLABUS

STREET ADDRESS 7799 LEESBURG PIKE, STE. #1100 NORTH

CITY, STATE FALLS CHURCH, VA. 22043

TITLE VICE PRESIDENT NAME DONALD HARDISON

STREET ADDRESS 7799 LEESBURG PIKE, STE. #1100 NORTH

CITY, STATE FALLS CHURCH, VA. 22043