

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

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

05-17-1999 90052 006 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P28182

1. Corporation Name

AEGIS RESEARCH CORPORATION

Principal Place of Business

**7799 LEESBURG PIKE
SUITE 1100 NORTH
FALLS CHURCH VA 22043**

Mailing Address

**7799 LEESBURG PIKE
SUITE 1100 NORTH
FALLS CHURCH VA 22043**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1990

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 **25**

29 **30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIDEOUR, HARRY P.	1.2 NAME	
STREET ADDRESS	7799 LEESBURG PIKE #1100 N	1.3 STREET ADDRESS	
CITY-ST-ZIP	FALLS CHURCH VA 22043	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEIGER, LEE ANNE F.	3.2 NAME	
STREET ADDRESS	7799 LEESBURG PIKE #1100 N	3.3 STREET ADDRESS	
CITY-ST-ZIP	FALLS CHURCH VA 22043	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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:

HARRY P. RIDEOUR JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/99
Date

Daytime Phone #

CR2E034 (11/98)

FLORIDA DEPARTMENT OF STATE
ATTACHMENT TO
1999 CORPORATION ANNUAL REPORT

554689-90052-6
P28182

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