

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215503803

1.) CORPORATION NAME:

MANTECH SUPPORT TECHNOLOGY, INC.

DUE DATE: **1/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **02652188**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12015 LEE JACKSON HWY

CITY/ST/ZIP: FAIRFAX, VA 22033-3300

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: DANIEL J. KEEFE TITLE: PRESIDENT ADDRESS: 12015 LEE JACKSON HWY CITY/ST/ZIP/CO: FAIRFAX, VA 22033-3300	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: KEVIN M PHILLIPS TITLE: TREAS/VP ADDRESS: 12015 LEE JACKSON HWY CITY/ST/ZIP/CO: FAIRFAX, VA 22033-3300	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: BONNIE J. COOK TITLE: SR VP ADDRESS: 12015 LEE JACKSON HWY CITY/ST/ZIP/CO: FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CLAUDE W ETZLER TITLE: VICE PRESIDENT ADDRESS: 12015 LEE JACKSON HWY CITY/ST/ZIP/CO: FAIRFAX, VA 22033-3300	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RICHARD M. FISNE TITLE: VICE PRESIDENT ADDRESS: 12015 LEE JACKSON HWY CITY/ST/ZIP/CO: FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: EDMUND M. GLABUS TITLE: SR VP ADDRESS: 12015 LEE JACKSON HWY CITY/ST/ZIP/CO: FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	JOHN P IRELAND	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033-3300		
NAME:	MARGARITA MENTUS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033		
NAME:	DAVID J. ROLL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033		
NAME:	MICHAEL C. TILLISON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033		
NAME:	MICHAEL J. USTER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033		
NAME:	L. WILLIAM VARNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033		
NAME:	HUI MARKVA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033		
NAME:	JEFFREY S BROWN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033-3300		
NAME:	CHRISTINE A LANCASTER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033-3300		
NAME:	GEORGE J. PEDERSEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	12015 LEE JACKSON HWY		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22033		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JOHN P IRELAND	JOHN P IRELAND, VICE	1/27/2015
_____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	_____ PRESIDENT PRINTED NAME AND CORPORATE TITLE	_____ DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.