

SCC eFile  
(6/10)

2011 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

211508022

1.) CORPORATION NAME:

**CACI Technology Insights, Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI  
CORPORATION SERVICE COMPANY  
11 S 12TH ST  
PO BOX 1463**

**RICHMOND, VA 23218**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

DUE DATE: **5/31/2011**

SCC ID NO: **03408515**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1100 N GLEBE ROAD

CITY/ST/ZIP: ARLINGTON, VA 22201-

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:	WILLIAM M FARL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1100 N GLEBE ROAD		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22201-		
NAME:	MICHAEL T FOLKMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1100 N GLEBE ROAD		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22201-		
NAME:	WARREN R PHILLIPS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2850 DAISY ROAD		
CITY/ST/ZIP/CO:	WOODBINE, MD 21797-		
NAME:	ARNOLD D MORSE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1100 N GLEBE ROAD		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22201-		
NAME:	THOMAS A MUTRYN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1100 N GLEBE RD		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22201-		

NAME: J PHILLIP LONDON TITLE: DIRECTOR ADDRESS: 1100 N GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22201-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
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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/ MICHAEL T FOLKMAN _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL T FOLKMAN, VICE PRESIDENT _____ PRINTED NAME AND CORPORATE TITLE	4/19/2011 _____ DATE
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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.