

1.) CORPORATION NAME:

**ManTech SRS Technologies, Inc.**

DUE DATE: **3/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F0511842**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**CA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12015 LEE JACKSON HWY

CITY/ST/ZIP: FAIRFAX, VA 22033

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.

<p>NAME: KEVIN M PHILLIPS TITLE: VICE PRESIDENT ADDRESS: 12015 LEE JACKSON HIGHWAY CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL M BROGAN TITLE: VICE PRESIDENT ADDRESS: 12015 LEE JACKSON HIGHWAY CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: DAVID A EIDSON TITLE: VICE PRESIDENT ADDRESS: 12015 LEE JACKSON HIGHWAY CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: CLAUDE W ETZLER TITLE: VICE PRESIDENT ADDRESS: 12015 LEE JACKSON HIGHWAY CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: DAVID W HEARDING TITLE: VICE PRESIDENT ADDRESS: 12015 LEE JACKSON HIGHWAY CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JEFFREY J INGALLS TITLE: VICE PRESIDENT ADDRESS: 12015 LEE JACKSON HIGHWAY CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN P IRELAND VICE PRESIDENT 12015 LEE JACKSON HWY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DANIEL C MCCORRY JR. VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY A ROMAN VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT J SCHERBENSKE VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL C TILLISON VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL J USTER VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	L WILLIAM VARNER VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KAREN M WALLER VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HUI MARKVA ASST TREASURER 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY S BROWN SECRETARY 12015 LEE JACKSON HWY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHRISTINE A LANCASTER ASST SECRETARY 12015 LEE JACKSON HWY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GEORGE J PEDERSEN DIRECTOR 12015 LEE JACKSON HWY FAIRFAX, VA 22033	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID J ROLL VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL B YACHMETZ VICE PRESIDENT 12015 LEE JACKSON HIGHWAY FAIRFAX, VA 22033	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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 SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN P IRELAND, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	3/31/2014 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.			