

1.) CORPORATION NAME:

Raytheon Applied Signal Technology, Inc.

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD SUITE 301
GLEN ALLEN, VA**

SCC ID NO: **F0534216**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 680 W CALIFORNIA AVENUE

CITY/ST/ZIP: SUNNYVALE, CA 94086

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: DR. JOHN R TREICHLER TITLE: PRESIDENT ADDRESS: 680 W CALIFORNIA AVENUE CITY/ST/ZIP/CO: SUNNYVALE, CA 94086	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ROGER W ANDERSON TITLE: VICE PRESIDENT ADDRESS: 680 W CALIFORNIA AVENUE CITY/ST/ZIP/CO: SUNNYVALE, CA 94086	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: MARK W MARCH TITLE: VICE PRESIDENT ADDRESS: 870 WINTER STREET CITY/ST/ZIP/CO: WALTHAM, MA 02451	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: ROBERT J MOORE TITLE: VICE PRESIDENT ADDRESS: 870 WINTER STREET CITY/ST/ZIP/CO: WALTHAM, MA 02451	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: DR. JOHN F PESATURO, JR. TITLE: VICE PRESIDENT ADDRESS: 680 W CALIFORNIA AVENUE CITY/ST/ZIP/CO: SUNNYVALE, CA 94086	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RENATO F ROSCHER, JR. TITLE: VICE PRESIDENT ADDRESS: 680 W CALIFORNIA AVENUE CITY/ST/ZIP/CO: SUNNYVALE, CA 94086	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	WILLIAM (BO) THOMAS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	680 W CALIFORNIA AVENUE		
CITY/ST/ZIP/CO:	SUNNYVALE, CA 94086		
NAME:	RICHARD R YUSE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2000 E EL SEGUNDO BLVD		
CITY/ST/ZIP/CO:	EL SEGUNDO, CA 90245		
NAME:	RICHARD A GOGLIA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	870 WINTER STREET		
CITY/ST/ZIP/CO:	WALTHAM, MA 02451		
NAME:	STEPHEN J IGLOWSKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	870 WINTER STREET		
CITY/ST/ZIP/CO:	WALTHAM, MA 02451		
NAME:	DANA NG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	870 WINTER STREET		
CITY/ST/ZIP/CO:	WALTHAM, MA 02451		
NAME:	BROOKE M BARTLESON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	870 WINTER STREET		
CITY/ST/ZIP/CO:	WALTHAM, MA 02451		
NAME:	BARBARA A POLLACK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	2000 E EL SEGUNDO BLVD		
CITY/ST/ZIP/CO:	EL SEGUNDO, CA 90245		
NAME:	DR. JOHN R TREICHLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CHFTECHNOLOGIST		
ADDRESS:	680 W CALIFORNIA AVENUE		
CITY/ST/ZIP/CO:	SUNNYVALE, CA 94086		

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/ BROOKE M BARTLESON	BROOKE M BARTLESON, ASST	4/26/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY	DATE
	PRINTED NAME AND CORPORATE TITLE	

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.