

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214512731

1.) CORPORATION NAME:

LOCKHEED MARTIN LIBRASCOPE CORPORATION

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street

SCC ID NO: **F0574113**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9500 GODWIN DRIVE

CITY/ST/ZIP: MANASSAS, VA 20110

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: LISA B CALLAHAN
TITLE: PRESIDENT
ADDRESS: 6801 ROCKLEDGE DRIVE
CITY/ST/ZIP/CO: BETHESDA, MD 20817

OFFICER

DIRECTOR

NAME: JOHN J CUNNINGHAM
TITLE: VICE PRESIDENT
ADDRESS: 9500 GODWIN DRIVE
CITY/ST/ZIP/CO: MANASSAS, VA 20110

OFFICER

DIRECTOR

NAME: KENNETH R POSSENRIEDE
TITLE: VP/TREAS
ADDRESS: 6801 ROCKLEDGE DRIVE
CITY/ST/ZIP/CO: BETHESDA, MD 20817

OFFICER

DIRECTOR

NAME: MARITZA CORDERO
TITLE: ASST SEC
ADDRESS: 6801 ROCKLEDGE DRIVE
CITY/ST/ZIP/CO: BETHESDA, MD 20817

OFFICER

DIRECTOR

NAME: RENA H WHITNEY
TITLE: ASST TREASURER
ADDRESS: 6801 ROCKLEDGE DRIVE
CITY/ST/ZIP/CO: BETHESDA, MD 20817

OFFICER

DIRECTOR

NAME: KATHY L ALLEN
TITLE: ASST SECRETARY
ADDRESS: 6801 ROCKLEDGE DRIVE
CITY/ST/ZIP/CO: BETHESDA, MD 20817

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GLENN E COLE ASST SECRETARY 6801 ROCKLEDGE DRIVE BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID A HEYWOOD ASST SECRETARY 6801 ROCKLEDGE DRIVE BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANCIS J LAMIR SECRETARY 6801 ROCKLEDGE DRIVE BETHESDA, MD 20817	<input checked="" type="checkbox"/> OFFICER	<input checked="" 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/ FRANCIS J LAMIR	FRANCIS J LAMIR, SECRETARY	3/10/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	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.