

1.) CORPORATION NAME:

BAE Systems Land & Armaments Holdings Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.
AUTH IN VI
CT CORPORATION SYSTEM
4107 COX RD STE 301
GLEN ALLEN, VA 23060**

DUE DATE: **11/30/2010**

SCC ID NO: **F1317736**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 1,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1101 WILSON BLVD
STE 2000

CITY/ST/ZIP: ARLINGTON, VA 22209-

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: | D MARK BAKER | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | VP & SEC | | |
| ADDRESS: | 1101 WILSON BLVD STE 2000 | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22209- | | |
| NAME: | TERRY L SHAW | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | ASST TREAS | | |
| ADDRESS: | 1601 RESEARCH BLVD | | |
| CITY/ST/ZIP/CO: | ROCKVILLE, MD 20850- | | |
| NAME: | FRANK POPE | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 1300 NORTH 17TH ST STE 1400 | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22209- | | |
| NAME: | BRADLEY W JACOBS | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 1101 WILSON BLVD | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22209- | | |
| NAME: | IAN T GRAHAM | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 1101 WILSON BLVD | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22209- | | |

| | | |
|---|---|-----------------------------------|
| NAME: BRIAN COLAN TITLE: VP & TREAS ADDRESS: 1300 NORTH 17TH ST STE 1400 CITY/ST/ZIP/CO: ARLINGTON, VA 22209- | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
|---|---|-----------------------------------|

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|--|---|-----------------------------------|
| NAME: PAUL W. COBB, JR. TITLE: VP & ASST SEC ADDRESS: 1101 WILSON BLVD CITY/ST/ZIP/CO: ARLINGTON, VA 22209- | <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.

| | | |
|--|---|--------------------------|
| <u>/s/ PAUL W. COBB, JR.</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PAUL W. COBB, JR., VP & ASST <u>SEC</u> PRINTED NAME AND CORPORATE TITLE | <u>9/27/2010</u> 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.