

1.) CORPORATION NAME:

BAE Systems Land & Armaments Holdings Inc.

DUE DATE: **11/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

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: 1300 NORTH 17TH ST
STE 1400

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.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ERWIN BIEBER	
TITLE:	PRESIDENT	
ADDRESS:	1300 NORTH 17TH ST STE 1400	
CITY/ST/ZIP/CO:	ARLINGTON, VA 22209	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JENNIFER H ALLEN	
TITLE:	VP & ASST SEC	
ADDRESS:	1101 WILSON BLVD	
CITY/ST/ZIP/CO:	ARLINGTON, VA 22209	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ALICE M ELDRIDGE	
TITLE:	VP & SEC	
ADDRESS:	1300 NORTH 17TH ST., STE 1400	
CITY/ST/ZIP/CO:	ARLINGTON, VA 22209	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	TERRY L SHAW	
TITLE:	ASST TREAS	
ADDRESS:	11487 SUNSET HILLS RD	
CITY/ST/ZIP/CO:	RESTON, VA 20190	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	IAN T GRAHAM	
TITLE:	DIRECTOR	
ADDRESS:	1101 WILSON BLVD	
CITY/ST/ZIP/CO:	ARLINGTON, VA 22209	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	BRADLEY W JACOBS	
TITLE:	DIRECTOR	
ADDRESS:	1101 WILSON BLVD	
CITY/ST/ZIP/CO:	ARLINGTON, VA 22209	

NAME: JOHN MARINUCCI TITLE: TREASURER ADDRESS: 1300 North 17th St Ste 1400 CITY/ST/ZIP/CO: Arlington, VA 22209	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: LINDA P HUDSON TITLE: VICE PRESIDENT ADDRESS: 1101 WILSON BLVD CITY/ST/ZIP/CO: ARLINGTON, VA 22209	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: TOM A ARSENEAULT TITLE: VICE PRESIDENT 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.		
/s/ JENNIFER H ALLEN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JENNIFER H ALLEN, VP & ASST SEC PRINTED NAME AND CORPORATE TITLE	10/15/2013 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.		