

1.) CORPORATION NAME:

Keane Federal Systems, Inc.

DUE DATE: **11/30/2011**

SCC ID NO: **F1424565**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

NATIONAL REGISTERED AGENTS INC

4001 North Ninth Street, Suite 227

ARLINGTON, VA 22203

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 100 CITY SQUARE

CITY/ST/ZIP: BOSTON, MA 02129-

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: JOHN M DICK
TITLE: SECRETARY
ADDRESS: 100 CITY SQUARE
CITY/ST/ZIP/CO: BOSTON, MA 02129-

OFFICER

DIRECTOR

NAME: RICHARD NADEL
TITLE: ASST TREASURER
ADDRESS: 100 CITY SQUARE
CITY/ST/ZIP/CO: BOSTON, MA 02129-

OFFICER

DIRECTOR

NAME: LAWRENCE D WHELAN JR
TITLE: TREASURER
ADDRESS: 100 CITY SQUARE
CITY/ST/ZIP/CO: BOSTON, MA 02129-

OFFICER

DIRECTOR

NAME: TIMOTHY CONWAY
TITLE: PRESIDENT
ADDRESS: 100 CITY SQUARE
CITY/ST/ZIP/CO: BOSTON, MA 02129-

OFFICER

DIRECTOR

NAME: C WHITNEY PEDERSEN
TITLE: ASST SECRETARY
ADDRESS: 100 CITY SQUARE
CITY/ST/ZIP/CO: BOSTON, MA 02129-

OFFICER

DIRECTOR

NAME: DAVID KAMINSKY TITLE: EX VP/CFO ADDRESS: 100 CITY SQUARE CITY/ST/ZIP/CO: BOSTON, MA 02129-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: GINA ABATE TITLE: VICE PRESIDENT ADDRESS: 100 CITY SQUARE CITY/ST/ZIP/CO: BOSTON, MA 02129-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: MARK DANIS TITLE: VICE PRESIDENT ADDRESS: 100 CITY SQUARE CITY/ST/ZIP/CO: BOSTON, MA 02129-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: THOMAS TILL TITLE: VICE PRESIDENT ADDRESS: 100 CITY SQUARE CITY/ST/ZIP/CO: BOSTON, MA 02129-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JAMES E DEVLIN TITLE: ASST SECRETARY ADDRESS: 100 CITY SQUARE CITY/ST/ZIP/CO: BOSTON, MA 02129-	<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/ RICHARD NADEL SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	RICHARD NADEL, ASST TREASURER PRINTED NAME AND CORPORATE TITLE
9/23/2011 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.	