

1.) CORPORATION NAME:

**Science, Engineering, and Technology
Associates Corporation**

DUE DATE: **3/31/2012**

SCC ID NO: **F1503582**

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

**AUTH IN VI
CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1005 NORTH GLEBE ROAD
4TH FLOOR

CITY/ST/ZIP: ARLINGTON, VA 22201-

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 J. FRATAMICO, JR.
TITLE: PRESIDENT
ADDRESS: 10260 CAMPUS POINT DRIVE
MS C6
CITY/ST/ZIP/CO: SAN DIEGO, CA 92121-

OFFICER

DIRECTOR

NAME: THOMAS J. BURNS
TITLE: VICE PRESIDENT
ADDRESS: 1005 N. GLEBE ROAD
SUITE 400
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: KEVIN E. MURPHY
TITLE: VICE PRESIDENT
ADDRESS: 10260 CAMPUS POINT DRIVE
MAIL STOP D-7
CITY/ST/ZIP/CO: SAN DIEGO, CA 92121-

OFFICER

DIRECTOR

NAME: RAFAEL ALONSO
TITLE: VICE PRESIDENT
ADDRESS: 1005 N. GLEBE ROAD
SUITE 400
CITY/ST/ZIP/CO: ARLINGTON, VA 22201-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DENNIS J. ANDERSH SENIOR VP 4001 NORTH FAIRFAX DRIVE 4TH FLOOR ARLINGTON, VA 22203-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRUCE C. DEAL VICE PRESIDENT 1005 N. GLEBE ROAD SUITE 400 ARLINGTON, VA 22201-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT DOUGLASS VICE PRESIDENT 1005 N. GLEBE ROAD SUITE 400 ARLINGTON, VA 22201-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONALD M. OLENDER VICE PRESIDENT 1005 N. GLEBE ROAD SUITE 400 ARLINGTON, VA 22201-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS STRAT VICE PRESIDENT 1005 N. GLEBE ROAD SUITE 400 ARLINGTON, VA 22201-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CLEMENT VINCENT QUELLA, III ASST SECRETARY 10260 CAMPUS POINT DRIVE MS A-3 SAN DIEGO, CA 92121-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES L. CANTOR EVP 1710 SAIC DRIVE MCLEAN, VA 22102-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSHUA E. CLORFEINE SECRETARY 10260 CAMPUS POINT DRIVE MS D7S SAN DIEGO, CA 92121-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARC H. CROWN Treasury Acc Of 10260 CAMPUS POINT DRIVE MS A-3 SAN DIEGO, CA 92121-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: STEVEN P. FISHER TITLE: Treasury Acc Of ADDRESS: 10260 CAMPUS POINT DRIVE MS A-3 CITY/ST/ZIP/CO: SAN DIEGO, CA 92121-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: K. STUART SHEA TITLE: CHAIRMAN ADDRESS: 1710 SAIC DRIVE CITY/ST/ZIP/CO: MCLEAN, VA 22102-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ CLEMENT VINCENT QUELLA, III</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>CLEMENT VINCENT QUELLA, III,</u> ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	<u>1/26/2012</u> DATE
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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.