

1.) CORPORATION NAME:

General Dynamics C4 Systems, Inc.

DUE DATE: **12/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1534199**

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: 8201 E MCDOWELL ROAD
M/D H 3250

CITY/ST/ZIP: SCOTTSDALE, AZ 85257

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:	CHRISTOPHER MARZILLI	
TITLE:	PRESIDENT	
ADDRESS:	8201 E MCDOWELL ROAD	
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85257	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	GREGORY GALLOPOULOS	
TITLE:	VICE PRESIDENT	
ADDRESS:	2941 FAIRVIEW PARK DR	
CITY/ST/ZIP/CO:	FALLS CHURCH, VA 22042	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DAVID HEEBNER	
TITLE:	VICE PRESIDENT	
ADDRESS:	2941 FAIRVIEW PARK RD DRIVE	
CITY/ST/ZIP/CO:	FALLS CHURCH, VA 22042	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	NOLEN BIVENS	
TITLE:	VICE PRESIDENT	
ADDRESS:	400 JOHN QUINCY ADAMS RD	
CITY/ST/ZIP/CO:	TAUNTON, MA 02780	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SCOTT BUTLER	
TITLE:	VICE PRESIDENT	
ADDRESS:	8201 E. MCDOWELL RD	
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85257	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DEVON ENGEL	
TITLE:	VICE PRESIDENT	
ADDRESS:	8201 E. MCDOWELL RD	
CITY/ST/ZIP/CO:	SCOTTSDALE, AZ 85257	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT HOWATT VICE PRESIDENT 8201 E. MCDOWELL RD SCOTTSDALE, AZ 85257	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRIAN LASS VICE PRESIDENT 400 JOHN QUINCY ADAMS RD TAUNTON, MA 02780	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEVIN MERRIGAN VICE PRESIDENT 8201 E. MCDOWELL RD SCOTTSDALE, AZ 85257	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTTY MILLER II VICE PRESIDENT 8201 E. MCDOWELL RD SCOTTSDALE, AZ 85257	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MANUEL B. MORA VICE PRESIDENT 8201 E. MCDOWELL RD SCOTTSDALE, AZ 85254	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN H WEIDMAN VICE PRESIDENT 400 JOHN QUINCY ADAMS RD TAUNTON, MA 02780	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM H WEISS VICE PRESIDENT 400 JOHN QUINCY ADAMS RD TAUNTON, MA 02780	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID H FOGG TREASURER 2941 FAIRVIEW PARK DR FALLS CHURCH, VA 22042	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KENNETH R. HAYDUK ASST TREASURER 2941 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KENNETH R. HAYDUK ASST TREASURER 2941 FAIRVIEW PARK ROAD FALLS CHURCH, VA 22042	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES L MARTIN ASST TREASURER 2941 FAIRVIEW PARK ROAD FALLS CHURCH, VA 22042	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: RICHARD K VON SEELEN TITLE: ASST TREASURER ADDRESS: 2941 FAIRVIEW PARK RD CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: JULIE P ASLAKSEN TITLE: SECRETARY ADDRESS: 2941 FAIRVIEW PARK DR CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042	<input checked="" type="checkbox"/> OFFICER	<input 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.

/s/ DEVON ENGEL	DEVON ENGEL, VICE PRESIDENT	11/19/2014
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.