

1.) CORPORATION NAME:

**General Dynamics Advanced Information Systems, Inc.**

DUE DATE: **12/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1534520**

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: 12450 FAIR LAKES CR

CITY/ST/ZIP: FAIRFAX, VA 22033

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.

<p>NAME: LEWIS F. VON THAER TITLE: PRESIDENT ADDRESS: 12450 FAIR LAKES CIRCLE CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: GREGORY GALLOPOULOS TITLE: VICE PRESIDENT ADDRESS: 12450 FAIR LAKES CIRCLE CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JULIE P. ASLAKSEN TITLE: SECRETARY ADDRESS: 2941 FAIRVIEW DRIVE CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: DAVID H. FOGG TITLE: TREASURER ADDRESS: 2941 FAIRVIEW PARK DR. CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL FINN TITLE: OTHER OFFICER ADDRESS: 12450 FAIR LAKES CIRCLE CITY/ST/ZIP/CO: FAIRFAX, VA 22033</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: GERARD J. DEMURO TITLE: DIRECTOR ADDRESS: 2941 FAIRVIEW PARK DRIVE SUITE 100 CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	HUGH REDD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2941 FAIRVIEW PARK DRIVE		
CITY/ST/ZIP/CO:	SUITE 100 FALLS CHURCH, VA 22042		

NAME:	James L. Martin	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	15000 Conference Center Dr.		
CITY/ST/ZIP/CO:	Chantilly, VA 20151		

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/ JULIE P. ASLAKSEN</u>	<u>JULIE P. ASLAKSEN, SECRETARY</u>	<u>8/9/2012</u>
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.