

1.) CORPORATION NAME:

Raytheon Trusted Computer Solutions, Inc.

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**C T CORPORATION SYSTEM
4701 COX RD
STE 301**

SCC ID NO: **F1561606**

GLEN ALLEN, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12950 WORLDGATE DRIVE
STE 600

CITY/ST/ZIP: HERNDON, VA 20170

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:	LISA S. BROWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	12950 WORLDGATE DR		
CITY/ST/ZIP/CO:	STE 600 HERNDON, VA 20170		

NAME:	NANCY GREER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP AND CFO		
ADDRESS:	1200 S. JUPITER ROAD		
CITY/ST/ZIP/CO:	GARLAND, TX 75042		

NAME:	MARK W. MARCH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP - TAXES		
ADDRESS:	870 WINTER STREET		
CITY/ST/ZIP/CO:	WALTHAM, MA 02451		

NAME:	ROBERT J. MOORE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	870 WINTER STREET		
CITY/ST/ZIP/CO:	WALTHAM, MA 02451		

NAME:	RICHARD A. GOGLIA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	870 WINTER STREET		
CITY/ST/ZIP/CO:	WALTHAM, MA 02451		

NAME:	STEPHEN J. IGLOWSKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	870 WINTER STREET		
CITY/ST/ZIP/CO:	WALTHAM, MA 02451		

NAME: BROOKE M. BARTLESON TITLE: ASST SECRETARY ADDRESS: 870 WINTER STREET CITY/ST/ZIP/CO: WALTHAM, MA 02451	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: STEVEN K. HAWKINS TITLE: CEO ADDRESS: 1200 S. JUPITER ROAD CITY/ST/ZIP/CO: GARLAND, TX 75042	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: MICHAEL W. MUTEK TITLE: ASST SECRETARY ADDRESS: 1200 S. JUPITER RD. CITY/ST/ZIP/CO: GARLAND, TX 75042	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: DANA NG TITLE: SECRETARY ADDRESS: 870 WINTER STREET CITY/ST/ZIP/CO: WALTHAM, MA 02451	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: JOHN M. SMITH TITLE: ASST SECRETARY ADDRESS: 1200 S. JUPITER RD. CITY/ST/ZIP/CO: GARLAND, TX 75042	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: DANA NG TITLE: DIRECTOR ADDRESS: 870 WINTER STREET CITY/ST/ZIP/CO: WALTHAM, MA 02451	<input type="checkbox"/> OFFICER <input checked="" 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/ BROOKE M. BARTLESON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BROOKE M. BARTLESON, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	9/27/2013 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.		