

1.) CORPORATION NAME:

DUE DATE: **4/30/2014**

**DRS RSTA, Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1665423**

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER, 16TH FLOOR  
1111 EAST MAIN STREET**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 100 NORTH BABCOCK STREET  
STE 2

CITY/ST/ZIP: MELBOURNE, FL 32935

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:	WILLIAM J. LYNN III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2345 CRYSTAL DRIVE		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22202		

NAME:	MARK A DORFMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2345 CRYSTAL DRIVE		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22202		

NAME:	TERENCE J MURPHY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2345 CRYSTAL DRIVE		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22202		

NAME:	ARMANDO CASANOVA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, FINANCE		
ADDRESS:	100 NORTH BABOCK STREET		
CITY/ST/ZIP/CO:	MELBOURNE, VA 32935		

NAME:	JOHN BAYLOUNY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, OPERATIONS		
ADDRESS:	2345 CRYSTAL DRIVE		
CITY/ST/ZIP/CO:	ARLINGTON, VA 22202		

NAME:	JASON RINSKY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, TAXATION		
ADDRESS:	5 SYLVAN WAY		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		

NAME: KATHERINE A KREBEL TITLE: SECRETARY ADDRESS: 201 EVANS LANE CITY/ST/ZIP/CO: ST. LOUIS, MO 63121	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: W. CHRISTOPHER DURBOROW TITLE: TREASURER ADDRESS: 2345 CRYSTAL DRIVE CITY/ST/ZIP/CO: ARLINGTON, VA 22202	<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/ JASON RINSKY	JASON RINSKY, VP, TAXATION	3/11/2014
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.