2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006927

Entity Name: LEIDOS SECURITY DETECTION & AUTOMATION, INC.

FILED
Mar 24, 2024
Secretary of State
7975326641CC

Current Principal Place of Business:

1750 PRESIDENTS STREET RESTON. VA 20190

Current Mailing Address:

1750 PRESIDENTS STREET RESTON, VA 20190 US

FEI Number: 04-3054475 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Name

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title ASSISTANT SECRETARY

Name HOWE, JERALD S. JR. Name BIRK, MATTHEW

Address 1750 PRESIDENTS STREET Address 1750 PRESIDENTS STREET

City-State-Zip: RESTON VA 20190 City-State-Zip: RESTON VA 20190

Title ASSISTANT SECRETARY Title TREASURY ACCOUNTS OFFICER

Name KLIGYS, RAE Name BROWN, MARCIA L.

Address 1750 PRESIDENTS STREET Address 1750 PRESIDENTS STREET

City-State-Zip: RESTON VA 20190 City-State-Zip: RESTON VA 20190

Title TREASURER Title SENIOR VICE PRESIDENT, REAL

LEAK, JAMES COUNCILL ESTATE

Address 1750 PRESIDENTS STREET Name SCOTT, ROBERT W

Address 1750 PRESIDENTS STREET

City-State-Zip: RESTON VA 20190 City-State-Zip: RESTON VA 20190

Title TREASURY ACCOUNTS OFFICER Title SECRETARY

Name ARSAC, CYRIL Name BERTOLO CANARIM, HENRIQUE

Address 1750 PRESIDENTS STREET Address 1750 PRESIDENTS STREET

City-State-Zip: RESTON VA 20190 City-State-Zip: RESTON VA 20190

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MATTHEW BIRK ASSISTANT SECRETARY 03/24/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name SCHMANSKE, MARY VICTORIA
Address 1750 PRESIDENTS STREET

City-State-Zip: RESTON VA 20190

Title ASSISTANT SECRETARY
Name KUNZ, J. CATHERINE

Address 1750 PRESIDENTS STREET

City-State-Zip: RESTON VA 20190

Title PRESIDENT

Name SCHMANSKE, MARY VICTORIA

Address 1750 PRESIDENTS STREET

City-State-Zip: RESTON VA 20190