

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004356

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: 360NETWORKS (USA) INC.

## Current Principal Place of Business:

867 COAL CREEK CIRCLE  
SUITE 160  
LOUISVILLE, CO 80027 US

## New Principal Place of Business:

## Current Mailing Address:

867 COAL CREEK CIRCLE  
SUITE 160  
LOUISVILLE, CO 80027 US

## New Mailing Address:

FEI Number: 84-1496451      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FRASENE, ROB  
Address: 867 COAL CREEK CIRCLE STE 160  
City-St-Zip: LOUISVILLE, CO 80027

Title: VP ( ) Delete  
Name: RAY, GARY  
Address: 867 COAL CREEK CIRCLE STE 160  
City-St-Zip: LOUISVILLE, CO 80027

Title: VP ( ) Delete  
Name: GUSTATSON, RON  
Address: 867 COAL CREEK CIRCLE, SUITE 160  
City-St-Zip: LOUISVILLE, CO 80027

Title: CFO ( ) Delete  
Name: MUELLER, CHRIS  
Address: 867 COAL CREEK CIRCLE, SUITE 160  
City-St-Zip: LOUISVILLE, CO 80027

Title: VP ( ) Delete  
Name: DENNEHY, LIZA  
Address: 867 COAL CREEK CIRCLE STE 160  
City-St-Zip: LOUISVILLE, CO 80027

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: OSWALD, TONNY  
Address: 867 COAL CREEK CIRCLE, SUITE 160  
City-St-Zip: LOUISVILLE, CO 80027

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY RAY

VP

04/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date