

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000068108

FILED
Apr 26, 2005
Secretary of State

Entity Name: LEAST COST ROUTING, INC.

Current Principal Place of Business:

1700 OLD MEADOW RD., 3RD FLOOR
MC LEAN, VA 221024302

New Principal Place of Business:

7901 JONES BRANCH DRIVE
STE 900
MC LEAN, VA 22102

Current Mailing Address:

1700 OLD MEADOW RD., 3RD FLOOR
SUITE 600
MC LEAN, VA 221024302

New Mailing Address:

7901 JONES BRANCH DRIVE
SUITE 900
MC LEAN, VA 22102

FEI Number: 59-3266693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: SINGH, PAUL
Address: 1700 OLD MEADOW RD., STE 300
City-St-Zip: MCLEAN, VA 22102

Title: TD () Delete
Name: HAZARD, NEIL
Address: 1700 OLD MEADOW RD., STE 300
City-St-Zip: MCLEAN, VA 22102

Title: SD () Delete
Name: DEPODESTA, JOHN
Address: 1700 OLD MEADOW RD., STE 300
City-St-Zip: MCLEAN, VA 22102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SINGH, PAUL
Address: 7901 JONES BRANCH DRIVE
City-St-Zip: MCLEAN, VA 22102

Title: TD (X) Change () Addition
Name: KLOSTER, THOMAS R
Address: 7901 JONES BRANCH DRIVE
City-St-Zip: MCLEAN, VA 22102

Title: SD (X) Change () Addition
Name: DEPODESTA, JOHN
Address: 7901 JONES BRANCH DRIVE
City-St-Zip: MCLEAN, VA 22102

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS KLOSTER

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04/26/2005

Electronic Signature of Signing Officer or Director

_____ Date