

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000000565

Entity Name: NEXVORTEX, INC.

Current Principal Place of Business:

510 SPRING ST
SUITE 250
HERNDON, VA 20170

FILED
Apr 23, 2024
Secretary of State
6047675246CC

Current Mailing Address:

510 SPRING ST
SUITE 250
HERNDON, VA 20170 US

FEI Number: 11-3683345

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, SECRETARY, DIRECTOR
Name KORNMANN, BRIAN R
Address 510 SPRING ST
 SUITE 250
City-State-Zip: HERNDON VA 20170

Title DIRECTOR
Name CUNNINGHAM, JOHN P
Address 510 SPRING ST
 SUITE 250
City-State-Zip: HERNDON VA 20170

Title DIRECTOR
Name AHEARN, FRANCIS X
Address 510 SPRING ST
 SUITE 250
City-State-Zip: HERNDON VA 20170

Title DIRECTOR, CEO
Name BLOSS, GEOFFREY
Address 510 SPRING ST
 SUITE 250
City-State-Zip: HERNDON VA 20170

Title TREASURER
Name BOROW, ELIZABETH R
Address 510 SPRING ST
 SUITE 250
City-State-Zip: HERNDON VA 20170

Title CFO
Name FECHTER, DOUGLAS
Address 510 SPRING ST
 SUITE 250
City-State-Zip: HERNDON VA 20170

Title VICE PRESIDENT AND DIRECTOR
Name KLEIN, JESSE
Address 510 SPRING ST
 SUITE 250
City-State-Zip: HERNDON VA 20170

Title VICE PRESIDENT AND DIRECTOR
Name DUNN, ROBERT C
Address 510 SPRING ST
 SUITE 250
City-State-Zip: HERNDON VA 20170

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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: EILEEN COHAN

ASSISTANT SECRETARY 04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. SECRETARY
Name COHAN, EILEEN
Address 510 SPRING ST
SUITE 250
City-State-Zip: HERNDON VA 20170