2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 854870

FILED Apr 03, 2012 Secretary of State

Entity Name: XEROX AUDIO VISUAL SOLUTIONS, INC.

Current Principal Place of Business: New Principal Place of Business:

3170 REPS MILLER RD SUITE 190 NORCROSS, GA 30071

Current Mailing Address: New Mailing Address:

3170 REPS MILLER RD. SUITE 190 NORCROSS, GA 30071

FEI Number: 58-1428621 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 32334 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

OFFICERS AND DIRECTORS:

Title:

Name: PHILLIPS, CATHERINE
Address: 3170 REPS MILLER RD.
City-St-Zip: NORCROSS, GA 30071

Title: 9

Name: PAINE, LAWRENCE

Address: 3820 NORTHDALE BLVD #200A

City-St-Zip: TAMPA, FL 33624

Title: C

Name: SALIERNO, THOMAS JR Address: 3820 NORTHDALE BLVD #200A

City-St-Zip: TAMPA, FL 33624

Title: VP

Name: BASS, R. EDWARD

Address: 3820 NORTHDALE BLVD #200A

City-St-Zip: TAMPA, FL 33624

Title: F

Name: COOPER, DANIEL R

Address: 3820 NORTHDALE BLVD #200A

City-St-Zip: TAMPA, FL 33624

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: LAWRENCE PAINE S 04/03/2012