

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005142

FILED
Apr 28, 2006
Secretary of State

Entity Name: AMERICAN FIBER SYSTEMS, INC.

Current Principal Place of Business:

100 MERIDIAN CENTRE, SUITE 250
ROCHESTER, NY 14623

New Principal Place of Business:

Current Mailing Address:

100 MERIDIAN CENTRE, SUITE 250
ROCHESTER, NY 14623

New Mailing Address:

FEI Number: 16-1584044

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: PCEO () Delete
Name: RUSIN, DAVID G
Address: 22 HARWOOD LANE
City-St-Zip: EAST ROCHESTER, NY 14445 US

Title: D () Delete
Name: MALONE, JOHN
Address: ONE CROSSROADS DRIVE
City-St-Zip: BEDMINSTER, NJ 07921 US

Title: VS () Delete
Name: RAMACHANDRAN, GITA
Address: 1512 EAST AVENUE
City-St-Zip: ROCHESTER, NY 14610 US

Title: D () Delete
Name: DRAZEN, JEFFREY
Address: 3000 SAND HILL ROAD, BLDG. 4, SUITE 210
City-St-Zip: MENLO PARK, CA 94025 US

Title: D () Delete
Name: MORRISSETTE, MARK
Address: TWO CITY CENTER, FIFTH FLOOR
City-St-Zip: PORTLAND, ME 04101

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

I hereby certify that the information supplied with this filing does not qualify for the 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: GITA RAMACHANDRAN

SECR

04/28/2006

Electronic Signature of Signing Officer or Director

Date