## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000002617

Entity Name: TECHTEAM GOVERNMENT SOLUTIONS, INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
SUITE 150	ERVIEW DRIV 1, VA 20151	E				
Current Mailing Address:			New Mailing Address:			
27335 WEST 11 MILE ROAD SOUTHFIELD, MI 48034			27335 WEST 11 MILE ROAD SOUTHFIELD, MI 48033			
FEI Number: 54-1271080 FEI Number Applied For ( ) FEI Num			nber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 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.						
SIGNATUR	E:					
	Electronic	Signature of Registered Agent	t		Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	C () E COYRO, WILLIAI 27335 W ELEVE SOUTHFIELD, M	N MILE		Title: Name: Address: City-St-Zip:	T (X) Change () Addition LICHTMAN, MARC J 27335 W ELEVEN MILE SOUTHFIELD, MI 48033	
Title: Name: Address: City-St-Zip:	PD () E KELLY, DENNIS 3863 CENTERVIE CHANTILLY, VA	EW DR #150		Title: Name: Address: City-St-Zip:	PDC (X) Change ( ) Addition KELLY, DENNIS J JR 3863 CENTERVIEW DR #150 CHANTILLY, VA 20151	
Title: Name: Address: City-St-Zip:	V () E BRIGHAM, ROBE 3863 CENTERVIE CHANTILLY, VA	EW DR #150		Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition BURLESON, ROBERT 3863 CENTERVIEW DR #150 CHANTILLY, VA 20151	
Title: Name: Address: City-St-Zip:	V () E AMET, MICHAEL 3863 CENTERVIE CHANTILLY, VA	EW DR #150		Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition ARENT, MICHAEL 3863 CENTERVIEW DR #150 CHANTILLY, VA 20151	
Title: Name: Address: City-St-Zip:	S () E SOSIN, MICHAEL 27335 W ELEVE SOUTHFIELD, M	N MILE		Title: Name: Address: City-St-Zip:	S (X) Change ( ) Addition SOSIN, MICHAEL A 27335 W ELEVEN MILE SOUTHFIELD, MI 48033	
Title: Name: Address: City-St-Zip:	AT () EDEL PAPA, CYNT 27335 W ELEVE SOUTHFIELD, MI	N MILE		Title: Name: Address: City-St-Zip:	AT (X) Change ( ) Addition DEL PAPA, CYNTHIA 27335 W ELEVEN MILE SOUTHFIELD, MI 48033	

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: MARC J. LICHTMAN T 04/26/2007