2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003682

Entity Name: AVICIS, INC.

FILED Mar 01, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
21670 RIDGETOP CIRCLE SUITE 100 STERLING, VA 20166					
Current Mailing Address:			New Maili	New Mailing Address:	
21670 RIDGETOP CIRCLE SUITE 100 STERLING, VA 20166					
FEI Number:	54-1672951	FEI Number Applied For () FEI	Number Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: N				Address of New Registered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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.					
SIGNATURE:					
	Electroni	c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name: Address:	KING, MICHAEL 21670 RIDGETO STERLING, VA PCOO () EHRHARDT, DA	DP CIRCLE, SUITE 100 20166 Delete	Title: Name: Address: City-St-Zip: Title: Name: Address:	CEO (X) Change () Addition SIMPSON, STEVE 720 COOL SPRINGS BLVD., SUITE 200 FRANKLIN, TN 37067 CFO (X) Change () Addition JAMES, TONY 720 COOL SPRINGS BLVD., SUITE 200	
City-St-Zip: Title: Name: Address: City-St-Zip:	MACK, CHRISTO	Delete DPHER E DP CIRCLE, SUITE 100	City-St-Zip: Title: Name: Address: City-St-Zip:	FRANKLIN, TN 37067 CAO (X) Change () Addition STEVENS, GREG 720 COOL SPRINGS BLVD., SUITE 200 FRANKLIN, TN 37067	
Title: Name: Address: City-St-Zip:	DIR () MCILWRAITH, J 250 EAST FIFTH CINCINNATI, OH	OHN I STREET	Title: Name: Address: City-St-Zip:	DIR (X) Change () Addition SIMPSON, STEVE 720 COOL SPRINGS BLVD, SUITE 200 FRANKLIN, TN 37067	
Title: Name: Address: City-St-Zip:	STEPHEN, KRÚ	THE AMERICAS, 4TH FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ADAMS, FRANK	ROAD, SUITE 800	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: GREG STEVENS CAO 03/01/2005