2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005347

Entity Name: FAIRFAX INFORMATION TECHNOLOGY SERVICES, INC.

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
412 MT. KEMBLE AVE MORRISTOWN, NJ 07960				412 MT. KEMBLE AVE SUITE 200 MORRISTOWN, NJ 07960			
Current Mailing Address:				New Mailing Address:			
305 MADISON AVE. PO BOX 1943 MORRISTOWN, NJ 079621943				412 MT. KEMBLE AVE, SUITE 200 ATTN: K JOHNSON MORRISTOWN, NJ 07960			
FEI Number:	: 52-2010021	FEI Number Applied For ()	FEI Numb	er Not Appli	cable ()	Certificate of Status	s Desired()
Name and	Address of C	Current Registered Agent:	N	lame and	Address of N	ew Registered A	gent:
1201 HAYS		CE COMPANY 01 US					
	named entity : e of Florida.	submits this statement for the p	urpose of o	changing its	s registered of	fice or registered	agent, or both,
SIGNATUR	RE:						
	Electror	nic Signature of Registered Age	ent			Date	
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () CHAN, SAMMY 1 MATHESON S CAUSEWAY BA	ST.	۸ <u>م</u>	itle: lame: ddress: city-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	DONOVAN, RIC	MFORD PLACE	۸ م	itle: lame: .ddress: city-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	DP () ROY, RAYMON 412 MT. KEMB MORRISTOWN	LE AVE	۸ <u>م</u>	itle: lame: .ddress: city-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	EVPC () MCDONOUGH, 412 MT. KEMB MORRISTOWN	LE AVE.	۸ <u>م</u>	itle: lame: ddress: city-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	S () SOOS, CAROL 305 MADISON MORRISTOWN	AVENUE	۸ م	itle: lame: .ddress: city-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VP () CHADWICK, JA 305 MADISON MORRISTOWN	AVE.	۸ م	ritle: lame: .ddress: city-St-Zip:	JOHNSON, KÈN	MBLE AVE, SUITE 20	0

I hereby certify that the information supplied with this filing does not qualify 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: KENNITH C. JOHNSON SVP 01/08/2008