2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2008 8:00 am
Secretary of State
02-07-2008 90025 035 ***150.00

DOCUMENT # F03000002055

1. Entity Name

EQUANT INC.

Principal Place of Business	Mailing Address
13775 MCLEAREN RD HERNDON VA 20171	13775 MCLEAREN RD HERNDON VA 20171

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: OAK HILL, VA	City & State: OAK HILL, VA
Zip / Country	Zip / Country

4. FEI Number: 54-1869506 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when changing)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TREECE, MACK 13775 MCLEAREN RD HERNDON VA 20171	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DIANA LEONARD 13775 MCLEAREN ROAD OAK HILL, VA 20171	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BERG, MICHAEL 13775 MCLEAREN RD HERNDON VA 20171	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR MICHAEL BERG 13775 MCLEAREN ROAD OAK HILL, VA 20171	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MCWHIRTER, BRUCE 13775 MCLEAREN RD HERNDON VA 20171	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER ANTHONY SPOTILLO 13775 MCLEAREN ROAD OAK HILL, VA 20171	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD WENTWORTH, NORMAN 13775 MCLEAREN RD HERNDON VA 20171	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OAK HILL, VA 20171	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D POPKO, MIKE 13775 MCLEAREN RD HERNDON VA 20171	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT NEWMAN, DAVID 13775 MCLEAREN RD HERNDON VA 20171	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OAK HILL, VA 20171	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ DAVID NEWMAN 1/23/08 703-471-2603
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #