


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90043 032 ***158.75

DOCUMENT # F06000003893 1. Entity Name APPTIS INC					
Principal Place of Business 14155 NEWBROOK DR CHANTILLY, VA 20151				Mailing Address 14155 NEWBROOK DR CHANTILLY, VA 20151	
2. Principal Place of Business - No P.O. Box # 4800 WESTFIELDS BOULV.		3. Mailing Address 4800 WESTFIELDS BLVD			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State CHANTILLY, VA		City & State CHANTILLY, VA		4. FEI Number 5405-1251160	
Zip 20151		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	DP BALDWIN, STEVEN W 14155 NEWBROOK DR CHANTILLY, VA 20151	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP NOTINI, ALBERT 4800 WESTFIELDS BOULEVARD CHANTILLY, VA 20151	Title <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC KLINSKY, STEVEN B 14155 NEWBROOK DR CHANTILLY, VA 20151	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC LA VIGNE, RENEE 4800 WESTFIELDS BOULEVARD CHANTILLY, VA 20151	Title <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AJOUZ, MICHAEL B 14155 NEWBROOK DR CHANTILLY, VA 20151	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NIGHTINGALE, BRIAN 14155 NEWBROOK DR CHANTILLY, VA 20151	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ATTILIO, PATRICK 4800 WESTFIELDS BOULEVARD CHANTILLY, VA 20151	Title <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SOFO, THOMAS 14155 NEWBROOK DR CHANTILLY, VA 20151	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CURRAN, CHARLES 14155 NEWBROOK DR CHANTILLY, VA 20151	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Sandra Louise Williams</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1/08/08 703-293-6789 <small>Date Daytime Phone #</small>		