

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005063

Entity Name: NEXSTONE COMMUNICATIONS, INC.

FILED
May 29, 2007
Secretary of State

Current Principal Place of Business:

101 ORCHARD RIDGE DRIVE
SUITE 300
GAITHERSBURG, MD 20878

New Principal Place of Business:

Current Mailing Address:

101 ORCHARD RIDGE DRIVE
SUITE 300
GAITHERSBURG, MD 20878

New Mailing Address:

FEI Number: 52-2084269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: KHAN, MALIK
Address: 101 ORCHARD RIDGE DRIVE, SUITE 300
City-St-Zip: GAITHERSBURG, MD 20878

Title: D () Delete
Name: NORTON, JEFFERSON
Address: 101 ORCHARD RIDGE DRIVE, SUITE 300
City-St-Zip: GAITHERSBURG, MD 20878

Title: D () Delete
Name: MCCARTHY, DAVID
Address: 101 ORCHARD RIDGE DRIVE, SUITE 300
City-St-Zip: GAITHERSBURG, MD 20878

Title: D () Delete
Name: LOFTUS, JOHN A
Address: 101 ORCHARD RIDGE DRIVE, SUITE 300
City-St-Zip: GAITHERSBURG, MD 20878

Title: D () Delete
Name: WALSH, DAVID
Address: 101 ORCHARD RIDGE DRIVE, SUITE 300
City-St-Zip: GAITHERSBURG, MD 20878

Title: D () Delete
Name: LUCK, PASCAL
Address: 101 ORCHARD RIDGE DRIVE, SUITE 300
City-St-Zip: GAITHERSBURG, MD 20878

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: KHAN, MALIK
Address: 101 ORCHARD RIDGE DRIVE, SUITE 300
City-St-Zip: GAITHERSBURG, MD 20878

Title: VP (X) Change () Addition
Name: NORTON, JEFFERSON
Address: 101 ORCHARD RIDGE DRIVE, SUITE 300
City-St-Zip: GAITHERSBURG, MD 20878

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEFFERSON NORTON

VP

05/29/2007

Electronic Signature of Signing Officer or Director

_____ Date