

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001353

Entity Name: AVAYA FEDERAL SOLUTIONS, INC.

FILED
Feb 03, 2009
Secretary of State

Current Principal Place of Business:

211 MOUNT AIRY ROAD
BASKING RIDGE, NJ 07920

New Principal Place of Business:

211 MOUNT AIRY ROAD
ROOM 1C519
BASKING RIDGE, NJ 07920

New Mailing Address:

FEI Number: 20-8174392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: ILL, CHARLES L
Address: 211 MOUNT AIRY ROAD
City-St-Zip: BASKING RIDGE, NJ 07920

Title: D () Delete
Name: MCCARTHY, ELIZABETH
Address: 1033 MCCARTHY BLVD
City-St-Zip: MILPITAS, CA 95035

Title: DS () Delete
Name: ALDERETE, ALBERT
Address: 1212 NEW YORK AVE NE, STE 1212
City-St-Zip: WASHINGTON, DC 20005

Title: P () Delete
Name: HANSEN, JEFF
Address: 2250 CORPORATE PARK DRIVE
City-St-Zip: HERNDON, VA 20171

Title: V () Delete
Name: MAHR, FRANK
Address: 211 MT. AIRY ROAD.
City-St-Zip: BASKING RIDGE, NJ 07920

Title: T () Delete
Name: BOOKER, MATTHEW
Address: 211 MT. AIRY ROAD
City-St-Zip: BASKING RIDGE, NJ 07920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDAS (X) Change () Addition
Name: CRAVEN, PAMELA F
Address: 211 MOUNT AIRY ROAD
City-St-Zip: BASKING RIDGE, NJ 07920

Title: DV (X) Change () Addition
Name: ABBOTT, TODD A
Address: 211 MOUNT AIRY ROAD
City-St-Zip: BASKING RIDGE, NJ 07920

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

Title: P (X) Change () Addition
Name: HANSEN, JEFFREY
Address: 2250 CORPORATE PARK DRIVE
City-St-Zip: HERNDON, VA 20171

Title: () Change () Addition
Name:
Address:
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: SANDRA EPPRECHT

Electronic Signature of Signing Officer or Director

AS

02/03/2009

Date