

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002779

FILED  
Feb 17, 2011  
Secretary of State

Entity Name: ALTRAN SOLUTIONS CORP.

**Current Principal Place of Business:**

451 D STREET  
BOSTON, MA 02210

**New Principal Place of Business:**

**Current Mailing Address:**

2525 RT 130 S BLDG E  
CRANBURY, NJ 08512

**New Mailing Address:**

451 D STREET  
BOSTON, MA 02210

FEI Number: 04-2924909

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GRARD, FREDERIC  
Address: 451 D STREET  
City-St-Zip: BOSTON, MA 02210

Title: P  
Name: FOLEY, THOMAS  
Address: 2525 ROUTE 130 SOUTH BLDG E  
City-St-Zip: CRANBURY, NJ 08512

Title: V  
Name: BLODGETT, SCOT J  
Address: 451 D. STREET  
City-St-Zip: BOSTON, MA 02210

Title: T  
Name: CAPRIO, CHRISTOPHER  
Address: 451 D STREET  
City-St-Zip: BOSTON, MA 02210

Title: S  
Name: MILLER, ALLYSON  
Address: 451 D STREET  
City-St-Zip: BOSTON, MA 02210

I hereby 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 all other like empowered.

SIGNATURE: ALLYSON MILLER

S

02/17/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date