

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003869

FILED
Mar 21, 2011
Secretary of State

Entity Name: KEYPOINT GOVERNMENT SOLUTIONS, INC.

Current Principal Place of Business:

1750 FOXTRAIL DRIVE
LOVELAND, CO 80538

New Principal Place of Business:

Current Mailing Address:

1750 FOXTRAIL DRIVE
LOVELAND, CO 80538

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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: MCKEON, ROBERT B
Address: 590 MADISON AVENUE, 41ST FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: CEO
Name: SCHLANGER, JEFF
Address: 590 MADISON AVENUE, 41ST FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: S
Name: MUSALLAM, RAMZI M
Address: 590 MADISON AVENUE, 41ST FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: CFO
Name: SYMSACK, CAROLYN
Address: 590 MADISON AVENUE, 41ST FLOOR
City-St-Zip: NEW YORK, NY 10022

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: CAROLYN SYMSACK

CFO

03/21/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date