

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005381

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** LIGHTSQUARED GP INC.

**Current Principal Place of Business:**

10802 PARKRIDGE BLVD  
RESTON, VA 20191

**New Principal Place of Business:**

**Current Mailing Address:**

10802 PARKRIDGE BLVD  
RESTON, VA 20191

**New Mailing Address:**

**FEI Number:** 54-2056190      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
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

**OFFICERS AND DIRECTORS:**

Title: CP  
Name: AHUJA, SANJIV  
Address: 450 PARK AVENUE, SUITE 2702  
City-St-Zip: NEW YORK, NY 10022

Title: SEC  
Name: LU, CURTIS  
Address: 10802 PARKRIDGE BLVD  
City-St-Zip: RESTON, VA 20191

Title: CFO  
Name: MONTEMARANO, MICHAEL  
Address: 450 PARK AVENUE, 30TH FL  
City-St-Zip: NEW YORK, NY 10022

Title: T  
Name: HAUFLER, KURT  
Address: 10802 PARKRIDGE BLVD  
City-St-Zip: RESTON, VA 20191

Title: D  
Name: HLADEK, KEITH  
Address: 450 PARK AVENUE, 30TH FL  
City-St-Zip: NEW YORK, NY 10022

Title: D  
Name: JENSON, PETER  
Address: 450 PARK AVENUE, 30TH FL  
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: CURTIS P. LU

SEC

04/25/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date