## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F11000000050

Entity Name: AVECTRA, INC.

Apr 22, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

7901 JOMNES BRANCH DR STE 500 7901 JONES BRANCH DRIVE MCLEAN, VA 221023338

SUITE 500

MCLEAN, VA 22102

**Current Mailing Address: New Mailing Address:** 

7901 JOMNES BRANCH DR STE 500 7901 JONES BRANCH DRIVE MCLEAN, VA 221023338

SUITE 500

MCLEAN, VA 22102

FEI Number: 36-4312521 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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:

DAVIS, RICHARD Name:

7901 JONES BRANCH DR., STE. 500 Address:

City-St-Zip: MCLEAN, VA 221023338

Title: ST

Name: ODOM, RUSS

7901 JONES BRANCH DR., STE. 500 Address:

MCLEAN, VA 221023338 City-St-Zip:

Title: D

MALEK, BARRY Name:

19224 FISHER ISLAND DR. Address: City-St-Zip: FISHER ISLAND, FL 33109

Title:

MICHELSON, BOB Name:

Address: 7901 JONES BRANCH DR., STE. 500

City-St-Zip: MCLEAN, VA 22102

Title:

Name: HOSLER, DAN

1033 SKOKIE BLVD STE 600 Address: City-St-Zip: NORTHBROOK, IL 60062

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: RUSS ODOM S 04/22/2012