2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001526

Entity Name: GOVERNMENT TELECOMMUNICATIONS, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
SUITE 300	HGATE PLACE 1, VA 20151					
Current Mailing Address:				New Mailing Address:		
4500 SOUTHGATE PLACE SUITE 300 CHANTILLY, VA 20151 US						
FEI Number:	,		FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
MCKEOWN, EVAN C/O APPLIED DIGITAL SOLUTIONS, INC. 1690 SOUTH CONGRESS AVE, SUITE 200 DELRAY BEACH, FL 33445 US				LANGSFORD, KAY E C/O APPLIED DIGITAL SOLUTIONS, INC. 1690 SOUTH CONGRESS AVE, SUITE 200 DELRAY BEACH, FL 33445 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: KAY E. LANGSFORD				04/30/2007		
	Electronic	Signature of Registered Agent				Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () C PATTON, RICHAR 4500 SOUTHGAT CHANTILLY, VA	E PL STE 300		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	VP () C FEDER, MICHAE 1690 S CONGRE DELRAY BEACH,	SS AVE STE 200		Title: Name: Address: City-St-Zip:	LANGSFORD, K	ONGRESS AVE SUITE 200
Title: Name: Address: City-St-Zip:	CUNEO, THOMAS	E PLACE, STE 300		Title: Name: Address: City-St-Zip:	BREECE, LORF	ONGRESS AVE., SUITE 200
Title: Name: Address: City-St-Zip:	S () E MCKEOWN, EVA 1690 SOUTH COI DELRAY BEACH,	N NGRESS AVE STE 200		Title: Name: Address: City-St-Zip:	LANGSFORD, K	ONGRESS AVE STE 200
Title: Name: Address: City-St-Zip:	T (X) E CARAGOL, WILL 4500 SOUTHGAT CHANTILLY, VA	E PL STE 300		Title: Name: Address: City-St-Zip:	()	Change () Addition
Title: Name: Address: City-St-Zip:	SILVERMAN, SCO	NGRESS AVE STE 200		Title: Name: Address: City-St-Zip:	()	Change () Addition

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: KAY E. LANGSFORD VP 04/30/2007