

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2004 8:00 am
Secretary of State

05-27-2004 90330 001 *1,650.00

DOCUMENT # F97000005248

1. Entity Name
XO FLORIDA, INC.



Principal Place of Business
**11111 SUNSET HILLS ROAD
RESTON, VA 20190**

Mailing Address
**11111 SUNSET HILLS ROAD
RESTON, VA 20190**

66424661



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03112004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

91-1831758

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **CEO** ☒ Delete
NAME **DAVIS, NATHANIEL A**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **PD** ☒ Delete
NAME **RULEY, MICHAEL S**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **SVSD** ☒ Delete
NAME **BEGEMAN, GARY D**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **SVRL** ☒ Delete
NAME **SALEMME, R GERARD**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **SVCF** ☐ Delete
NAME **REHBERGER, WAYNE**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **SILVER SPRING, MD 20910**

TITLE **AS** ☒ Delete
NAME **MONTFORT, RICK**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/D/CEO** ☐ Change ☒ Addition
NAME **CARL J. GRIVNER**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **S/V** ☐ Change ☒ Addition
NAME **LEE WEINER**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **T** ☐ Change ☒ Addition
NAME **KRISTI JUNG**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **CHIEF TAX OFFICER** ☐ Change ☒ Addition
NAME **MICHAEL O'DAY**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **D/V/CFO** ☒ Change ☐ Addition
NAME **WAYNE REHBERGER**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

TITLE **S** ☐ Change ☒ Addition
NAME **BEN PRESTON**
STREET ADDRESS **11111 SUNSET HILLS ROAD**
CITY-ST-ZIP **RESTON, VA 20190**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/04

703/547-2727

Date

Daytime Phone #