2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005
Secretary of State

DOCUMENT# F99000002083

Entity Name: AXIOM INFORMATION TECHNOLOGY CORPORATION

Current Principal Place of Business:

3490 PIEDMONT RD
SUITE 800
ATLANTA, GA 30305

New Principal Place of Business:

3565 PIEDMONT RD, TWO PIEDMONT CTR
SUITE 100
ATLANTA, GA 30305

Current Mailing Address:

3490 PIEDMONT RD
SUITE 800
ATLANTA, GA 30305

New Mailing Address:

3565 PIEDMONT RD, TWO PIEDMONT CTR
SUITE 100
ATLANTA, GA 30305

FEI Number: 54-1474104 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete
Name: TAYLOR, ROBERT A
Address: 3490 PIEDMONT RD #800
City-St-Zip: ATLANTA, GA 30305

Title: STD ( ) Delete
Name: TAYLOR, VICKI L
Address: 3490 PIEDMONT RD #800
City-St-Zip: ATLANTA, GA 30305

Title: D ( ) Delete
Name: ALCORN, DOUGLAS J
Address: 4694-B PINECREST OFFICE PARK DR
City-St-Zip: ALEXANDRIA, VA 22312

Title: D ( ) Delete
Name: DURRETTE, WYATT B
Address: 600 E MAIN ST 20TH FL
City-St-Zip: RICHMOND, VA 23219

Title: D ( ) Delete
Name: HAAG, JOHN B
Address: 60 DOGLEG RD
City-St-Zip: LAKE MONTICELLO, VA 22963

Title: D (X) Delete
Name: SAVOPOULOS, PHILIP S
Address: 5010 INWOOD STREET
City-St-Zip: HYATTSVILLE, MD 20781

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change ( ) Addition
Name: TAYLOR, ROBERT A
Address: 3565 PIEDMONT RD., STE 100
City-St-Zip: ATLANTA, GA 30305

Title: STD (X) Change ( ) Addition
Name: TAYLOR, VICKI L
Address: 3565 PIEDMONT RD., STE 100
City-St-Zip: ATLANTA, GA 30305

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VICKI L. TAYLOR STD 02/03/2005

Electronic Signature of Signing Officer or Director — Date