

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002885

FILED
Apr 05, 2004
Secretary of State

Entity Name: TELIGENT SERVICES, INC.

Current Principal Place of Business:

460 HERNDON PARKWAY
SUITE 100
HERNDON, VA 20170

New Principal Place of Business:

Current Mailing Address:

460 HERNDON PARKWAY
SUITE 100
HERNDON, VA 20170

New Mailing Address:

FEI Number: 51-0390077 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DP () Delete
Name: CONTINENZA, JAMES
Address: 460 HERNDON PARKWAY STE 100
City-St-Zip: HERNDON, VA 20170

Title: D () Delete
Name: KUPINSKY, STUART
Address: 460 HERNDON PARKWAY STE 100
City-St-Zip: HERNDON, VA 20170

Title: T () Delete
Name: MARSHALL, WILLIAM
Address: 460 HERNDON PARKWAY STE 100
City-St-Zip: HERNDON, VA 20170

Title: AS () Delete
Name: DAIGNEAULT, ALESSANDRA
Address: 460 HERNDON PARKWAY STE 100
City-St-Zip: HERNDON, VA 20170

Title: AS () Delete
Name: LEVENTHAL, BRIAN
Address: 460 HERNDON PARKWAY STE 100
City-St-Zip: HERNDON, VA 20170

Title: S () Delete
Name: DEES, STACY
Address: 460 HERNDON PARKWAY STE 100
City-St-Zip: HERNDON, VA 20170

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: STACY DEES

S

04/05/2004

Electronic Signature of Signing Officer or Director

_____ Date