2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006692

Entity Name: SNVC, L.C.

Address:

City-St-Zip:

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 12150 MONUMENT DR. STE 510 FAIRFAX, VA 22033 **Current Mailing Address: New Mailing Address:** 12150 MONUMENT DR. STE 510 FAIRFAX, VA 22033 FEI Number: 54-1898422 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: INCORP SERVICES, INC 17888 67TH COURT NORTH US LOXAHATCHEE, FL 33470 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete DEWITT, THOMAS Name: Name: 12150 MONUMENT DR. STE 510 Address: Address: City-St-Zip: FAIRFAX, VA 22033 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CARLSON, MARK Name: Name: Address: 12150 MONUMENT DR. STE 510 Address: City-St-Zip: FAIRFAX, VA 22033 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition ATHAN, BYRON WHITNEY, MARK Name: Name: 12150 MONUMENT DR. STE 510 45150 RUSSELL BRANCH PARKWAY, SUITE 303 Address: Address: City-St-Zip: FAIRFAX, VA 22033 City-St-Zip: ASHBURN, VA 20147 Title: MGR () Delete Title: () Change () Addition LYTLE, WILLIAM Name: Name: 12150 MONUMENT DR. STE 510 Address: Address: City-St-Zip: FAIRFAX, VA 22033 City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition ATHAN, BYRON Name: Name:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

12150 MONUMENT DR. STE 510

FAIRFAX, VA 22033

SIGNATURE: MARK CARLSON MGR 04/29/2009