

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169500

Entity Name: SI GOVERNMENT SOLUTIONS, INC.

FILED
Jan 21, 2008
Secretary of State

Current Principal Place of Business:

4450 EAU GALLIE BOULEVARD
SUITE 240
MELBOURNE, FL 32934

New Principal Place of Business:

Current Mailing Address:

4450 EAU GALLIE BOULEVARD
SUITE 240
MELBOURNE, FL 32934

New Mailing Address:

FEI Number: 20-2028570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KANCILLIA, JOHN R
1800 WEST HIBISCUS BOULEVARD
SUITE 138
MELBOURNE, FL 32901 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: D () Delete
Name: BURNS, GORDON CEO
Address: 4450 EAU GALLIE BOULEVARD, SUITE 240
City-St-Zip: MELBOURNE, FL 32934

Title: D () Delete
Name: GILLETTE, TERRY B PRES
Address: 4450 EAU GALLIE BOULEVARD, SUITE 240
City-St-Zip: MELBOURNE, FL 32934

Title: D () Delete
Name: RAY, HELAYNE SEC/TRE
Address: 4450 EAU GALLIE BOULEVARD, SUITE 240
City-St-Zip: MELBOURNE, FL 32934

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:

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: HELAYNE RAY

COO

01/21/2008

Electronic Signature of Signing Officer or Director

Date