

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000012213

Entity Name: VIASYS NETWORK SERVICES, INC.

FILED
Dec 10, 2008
Secretary of State

Current Principal Place of Business:

2944 DRANE FIELD ROAD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

2944 DRANE FIELD ROAD
LAKELAND, FL 33811

New Mailing Address:

FEI Number: 20-2328798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RECKER, TRACY
2944 DRANE FIELD RD
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

OWENS, ANGELA
2944 DRANE FIELD RD
LAKELAND, FL 33811 US

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: ANGELA OWENS

12/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: AS () Delete
Name: ALLEN, JAMES
Address: 2944 DRANE FIELD ROAD
City-St-Zip: LAKELAND, FL 33811 US

Title: D,VP () Delete
Name: HALL, GERRY W
Address: 1117 PERIMETER CENTER WEST
City-St-Zip: ATLANTA, GA 30338 US

Title: DVP () Delete
Name: SMITH, RAYMOND J
Address: 1117 PERIMETER CENTER WEST
City-St-Zip: ATLANTA, GA 30338 US

Title: T,S (X) Delete
Name: SMITH, RAYMOND J
Address: 1117 PERIMETER CENTER WEST
City-St-Zip: ATLANTA, GA 30338 US

Title: DP (X) Delete
Name: HEMRICH, JAMES E
Address: 2944 DRANE FIELD RD
City-St-Zip: LAKELAND, FL 33811 US

Title: AS (X) Delete
Name: RECKER, TRACY
Address: 2944 DRANE FIELD RD
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOP (X) Change () Addition
Name: OYSTER, MICHAEL
Address: 2944 DRANE FIELD ROAD
City-St-Zip: LAKELAND, FL 33811 US

Title: CFOS (X) Change () Addition
Name: SMITH, RAYMOND J
Address: 2944 DRANEFIELD ROAD
City-St-Zip: LAKELAND, FL 33811 US

Title: AS (X) Change () Addition
Name: FERCHEK, TRACIE
Address: 2944 DRANEFIELD ROAD
City-St-Zip: LAKELAND, FL 33811 US

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: MICHAEL OYSTER

CEOP

12/10/2008

Electronic Signature of Signing Officer or Director

Date