

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26541

Entity Name: BT AMERICAS INC.

FILED
Jan 25, 2006
Secretary of State

Current Principal Place of Business:

350 MADISON AVENUE
4TH FLOOR
NEW YORK, NY 10017 US

New Principal Place of Business:

2025 M STREET, NW, SUITE 450
ATTN: JAMIE NEWELL
WASHINGTON DC, DC 20036 US

Current Mailing Address:

11440 COMMERCE PARK DRIVE
ATTN: MICHELLE GALLAGHER
RESTON, VA 20190 US

New Mailing Address:

2025 M STREET, NW, SUITE 450
ATTN: JAMIE NEWELL
WASHINGTON DC, DC 20036 US

FEI Number: 13-3459785

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 32301 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: PD () Delete
Name: POL, CHUCK
Address: 350 MADISON AVE., 4TH FLR
City-St-Zip: NEW YORK, NY 10017

Title: OFCR () Delete
Name: LEE, DAVID
Address: 11440 COMMERCE PARK
City-St-Zip: RESTON, VA 20190

Title: CFOD () Delete
Name: MCCAULEY, ANDREW
Address: 350 MADISON AVE., 4TH FLR
City-St-Zip: NEW YORK, NY 10017

Title: AT () Delete
Name: MORZORATI, LYNN
Address: 4201 LEXINGTON AVENUE NORTH
City-St-Zip: ARDEN HILLS, MN 55126

Title: AS () Delete
Name: CHACKO, SHEBA
Address: 11911 FREEDOM DR, SUITE 1100
City-St-Zip: RESTON, VA 20190

Title: S () Delete
Name: REACH, CHUCK
Address: 350 MADISON AVE., 4TH FLR.
City-St-Zip: NEW YORK, NY 10017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: LEE, DAVID
Address: 11440 COMMERCE PARK
City-St-Zip: RESTON, VA 20190

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

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

Title: AS (X) Change () Addition
Name: NEWELL, JAMIE
Address: 2025 M STREET NW
City-St-Zip: WASHINGTON DC, DC 20036

Title: S (X) Change () Addition
Name: VERDERAME, KRISTEN
Address: 2025 M STREET NW
City-St-Zip: WASHINGTON DC, DC 20036

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMIE NEWELL

AS

01/25/2006

Electronic Signature of Signing Officer or Director

_____ Date