

**2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1200000169

**Entity Name:** ACADEMI CONSULTING SERVICES LLC

**Current Principal Place of Business:**

850 PUDDIN RIDGE ROAD  
MOYOCK, NC 27958-1029

**Current Mailing Address:**

850 PUDDIN RIDGE ROAD  
MOYOCK, NC 27958-1029

**FEI Number: 45-3961046**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           NIXON, JAMES CRAIG  
Address        1600 TYSONS BLVD.  
City-State-Zip: MCLEAN VA 22102

Title           MANAGER  
Name           BURCKER, DOUGLAS FARON  
Address        850 PUDDIN RIDGE ROAD  
City-State-Zip: MOYOCK NC 27958-1029

*I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: DOUGLAS FARON BURCKER**

**MANAGER**

**06/11/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date