

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # F29733

1. Entity Name
CABLE SENTRY CORPORATION



Principal Place of Business

**2500 N TAMiami TRAIL
#212
NAPLES, FL 34103 US**

Mailing Address

**2500 N TAMiami TRAIL
#212
NAPLES, FL 34103 US**



01062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2114470** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD COOPER, RONALD 5619 DTC PARKWAY, SUITE 800 GREENWOOD VILLAGE, CO 80111
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVGS SONNENBERG, BRAD 5619 DTC PARKWAY, SUITE 800 GREENWOOD VILLAGE, CO 80111
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEOD SCHLEYER, WILLIAM T 5619 DTC PARKWAY, SUITE 800 GREENWOOD VILLAGE, CO 80111
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS WATERMAN, KATHY L 5619 DTC PARKWAY, SUITE 800 GREENWOOD VILLAGE, CO 80111
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVTD WITTMAN, VANESSA 5619 DTC PARKWAY, SUITE 800 GREENWOOD VILLAGE, CO 80111
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPAS ZEREFOS, JAMES 5619 DTC PARKWAY, SUITE 800 GREENWOOD VILLAGE, CO 80111

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02/01/05-80045-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathy L. Waterman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-2005 (303) 268-6300
Date Daytime Phone #

Kathy L. Waterman, Assistant Secretary