2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 04, 2005 8:00 am Secretary of State

DOCUMENT # L0400065940 1. Entity Name ASN PALM TRACE LANDINGS LLC						05-04-2005 90035 022 ****50.00				
Principal Plac		Mailing Address	Mailing Address 9200 E. PANORAMA CIRCLE, SUITE 400				14	UU06793		
9200 E. PANORAMA CIRCLE, SUITE 400 ENGLEWOOD, CO 80112		ENGLEWOOD, CO 80112						4 EGIJO EIVEL BIJVO (641 0)BIJ 600		
2. Principal Place of Business		3. Mailing Address								
Suite, Apt, #, etc.		Suite, Apt. #, etc.		04262	005	Chg-LLC	CR2E083 (10/03)			
City & State		City & State		4. FEI N	lumber			oplied For		
Zip .	Country Zip Cour		Coun	try	5. Certificate of Status Desired S5.00 Additional Fee Required			ditional		
<u> </u>	6. Name and Address of Current	Registered Agent			7. Name	e and A	Address of New Ro			
				Name	ne .					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)						
	,. =									
			City					FL Zip Cod		
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 little if applicable. (NOTE: Registered Agent signature required when reinstating)										
Filing Fee Is \$50.00 Due by May 1, 2005										
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indicated on this report is true and accurate and that my 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.

SIGNATURE: David M Flory
SIGNATURE AND TYPED OF PRIMED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

303.708.5959