## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P22189

Entity Name: GEA POWER COOLING INC

FILED Sep 03, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
143 UNION BOULEVARD STE 400	)			
LAKEWOOD, CO 80228	US			
Current Mailing Address:		New Mailing Address:		
143 UNION BOULEVARD	)	143 UNION BLVD.		
STE 400 LAKEWOOD, CO 80228	US	STE 400 LAKEWOOD, CO 80228 US		
FEI Number: 51-0268494	FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired	d ( )	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	Name and Address of New Registered Agent:	
CT CORPORATION SYS 1200 S. PINE ISLAND RO PLANTATION, FL 33324	DAD			
The above named entity sin the State of Florida.	submits this statement for the p	ourpose of changing its registered office or registered agent,	or both,	
SIGNATURE:				

LAKEWOOD, CO 80228

Address:

City-St-Zip:

City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition HEBERT, RICHARD HEBERT, RICHARD D Name: Name: 143 UNION BLVD #400 Address: 143 UNION BLVD #400 Address: City-St-Zip: LAKEWOOD, CO 80228 City-St-Zip: LAKEWOOD, CO 80228 US Title: () Delete Title: (X) Change ( ) Addition WERGES, CYNTHIA J WERGES, CYNTHIA J Name: Name: Address: 143 UNION BLVD Address: 143 UNION BLVD #400 LAKEWOOD, CO 80228 US LAKEWOOD, CO 80228 City-St-Zip: City-St-Zip: Title: (X) Change ( ) Addition Title: ( ) Delete SCHMALE, HELMUT Name: KATZ, SHELBY L Name: DORSTENER STRASSE 484 Address: 143 UNION BLVD #400 Address: City-St-Zip: BOCHUM GERMANY, GR D-4488 City-St-Zip: LAKEWOOD, CO 80228 US Title: () Delete Title: (X) Change ( ) Addition Name:

PFLEGER, DIDIER MANOLOPOULOS, PETER Name: DORSTENER STRASSE 484 Address: DORSTENER STRASSE 484 BOCHUM GERMANY, GR D-4488 City-St-Zip: BOCHUM, GR 44809 GR

Title: Title: (X) Change ( ) Addition () Delete KATZ, SHELBY JELINIEWSKI, JEORG Name: Name: Address: 143 UNION BLVD #400

Address: DORSTENER STRASSE 484 City-St-Zip: BOCHUM, GR 44809 GR

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: SHELBY L. KATZ 09/03/2009 S