


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90547 018 ***158.75

DOCUMENT # 408428
1. Entity Name
LifeFleet Southeast, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6200 S. Syracuse Way

3. Mailing Address
6200 S. Syracuse Way

Suite, Apt. #, etc.
Suite 200

Suite, Apt. #, etc.
Suite 200

DO NOT WRITE IN THIS SPACE

City & State
Greenwood Village, Colorado

City & State
Greenwood Village, Colorado

4. FEI Number
59-1395439

Applied For
 Not Applicable

Zip
80111

Country
US

Zip
80111

Country
US

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Road

City **Plantation** **FL** Zip Code **33324**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
D
NAME
William Sanger
STREET ADDRESS
6200 S. Syracuse Way, #200
CITY-ST-ZIP
Greenwood Village, Colorado 80111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
P
NAME
William Pahl
STREET ADDRESS
6200 S. Syracuse Way, #200
CITY-ST-ZIP
Greenwood Village, Colorado 80111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
V/T/AS
NAME
Edward Zdobinski
STREET ADDRESS
6200 S. Syracuse Way, #200
CITY-ST-ZIP
Greenwood Village, Colorado 80111

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
V/S
NAME
Robert Siler
STREET ADDRESS
12490 Ulmertown Road
CITY-ST-ZIP
Largo, Florida 33774

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
V/AS
NAME
Lori A.E. Evans
STREET ADDRESS
3221 N. Service Road
CITY-ST-ZIP
Burlington, ON Canada L7R3Y8

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
V/AS
NAME
Ivan Cairns
STREET ADDRESS
3221 N. Service Road
CITY-ST-ZIP
Burlington, ON Canada L7R3Y8

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE 

Lori A.E. Evans

1/9/03

303-495-1227

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

DO NOT WRITE IN THIS SPACE

Attachment
30015933
408428

LifeFleet Southeast, Inc.
408428
Cont.

#11
AS
Susan Whittaker
600 Six Flags Drive
Suite 300
Arlington, Texas 76011