## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 841028**

Entity Name: AFFINITY ROAD AND TRAVEL CLUB, INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
64 INVERN ENGLEWO	IESS DR E OOD, CO 80112	US			ESS DR EAST OD, CO 80112	US
Current Mailing Address:				New Mailing Address:		
64 INVERN ENGLEWO	IESS DR E IOD, CO 80112	US			ESS DR EAST OD, CO 80112	US
FEI Number:	23-2066824	FEI Number Applied For()	FEI Num	ber Not Appli	cable ( ) Ce	ertificate of Status Desired ( )
Name and	Address of Cu	rrent Registered Agent:		Name and	Address of New	Registered Agent:
1200 S. PIN PLANTATIO	DRATION SYSTI NE ISLAND ROA DN, FL 33324 named entity sul	ND US	urpose of	changing it	s reaistered offic	e or registered agent, or both,
in the State		•	ı	0 0	J	<b>3</b>
SIGNATUR		Oissanting of Descistant Assess	_1			Data
Election Cam		Signature of Registered Ager rust Fund Contribution ( ).	nt			Date
	AND DIRECTO	.,		ΔΟΟΙΤΙΟΝ	S/CHANGES TO	OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	DC ( ) Do ADAMS, STEPHEI 64 INVERNESS D ENGLEWOOD, CO	elete N RIVE EAST		Title: Name: Address: City-St-Zip:		ange()Addition
Title: Name: Address: City-St-Zip:	S () DO LUSK, TERRY C 64 INVERNESS D ENGLEWOOD, CO	RIVE EAST		Title: Name: Address: City-St-Zip:	S (X) Ch JAMES, LAURA A 64 INVERNESS DR ENGLEWOOD, CO	
Title: Name: Address: City-St-Zip:	V () DO KUPPER, MARK 64 INVERNESS D ENGLEWOOD, CO	R. EAST		Title: Name: Address: City-St-Zip:	VP (X) Ch KUPPER, MARK 64 INVERNESS DR ENGLEWOOD, CO	
Title: Name: Address: City-St-Zip:	AS () DO YORK, ROBERT TO 64 INVERNESS DO ENGLEWOOD, CO	- RIVE EAST		Title: Name: Address: City-St-Zip:	( ) Ch	ange ( ) Addition
Title: Name: Address: City-St-Zip:	CEO ( ) DO SCHNEIDER, MIC 2575 VISTA DEL I VENTURA, CA 93	HAEL MAR DR		Title: Name: Address: City-St-Zip:	CEO (X) Ch SCHNEIDER, MICH 64 INVERNESS DR ENGLEWOOD, CO	RIVE EAST

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: MARK KUPPER VP 04/25/2008