

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # F00000006478

1. Entity Name
ARCMS, INC.



Principal Place of Business
STE 900, 600 GRANT STREET
DENVER, CO 80203

Mailing Address
STE 900, 600 GRANT STREET
DENVER, CO 80203



DO NOT WRITE IN THIS SPACE

01192005 No Chg-P CR2E034 (10/03)

4. FEI Number
84-1509877

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 _____ (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 CD
NAME JACKSON, SCOTT D
STREET ADDRESS 600 GRANT ST., STE 900
CITY-ST-ZIP DENVER, CO

TITLE P
NAME SPRENGLE, JOHN G
STREET ADDRESS 600 GRANT ST., STE 900
CITY-ST-ZIP DENVER, CO

TITLE VS
NAME GESELL, SCOTT L
STREET ADDRESS 600 GRANT ST., STE 900
CITY-ST-ZIP DENVER, CO

TITLE VP
NAME FRENCH, MARY R
STREET ADDRESS 600 GRANT ST., STE 900
CITY-ST-ZIP DENVER, CO 80203

TITLE VT
NAME KREIDER, LAWRENCE
STREET ADDRESS 600 GRANT STREET STE 900
CITY-ST-ZIP DENVER, CO 80203

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1100000218789
02/08/05-80002-011 150.00

**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)(c), 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/05 303-291-0222
Date Daytime Phone #