

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90010 019 ***150.00

DOCUMENT # F01000000608

1. Entity Name
VOYANT TECHNOLOGIES, INC.

Principal Place of Business 1499 WEST 121ST STREET WESTMINSTER CO 80234	Mailing Address 1499 WEST 121ST STREET WESTMINSTER CO 80234
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1765 West 121st Ave Suite, Apt. #, etc.	3. Mailing Address 1765 West 121st Ave Suite, Apt. #, etc.
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City & State Westminster, CO	City & State Westminster, CO
Zip 80234 Country USA	Zip 80234 Country USA

4. FEI Number 84-1504410	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State FL Zip Code

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS	
TITLE NAME PCEO ERNSTROM, WILLIAM P	<input type="checkbox"/> Delete
STREET ADDRESS 1499 WEST 121ST STREET	
CITY-ST-ZIP WESTMINSTER CO 80234	
TITLE NAME CFOS GATCHELL, GARY	<input type="checkbox"/> Delete
STREET ADDRESS 1499 WEST 121ST STREET	
CITY-ST-ZIP WESTMINSTER CO 80234	
TITLE NAME COOD SCHULTE, RICHARD A	<input type="checkbox"/> Delete
STREET ADDRESS 1499 WEST 121ST STREET	
CITY-ST-ZIP WESTMINSTER CO 80234	
TITLE NAME D DETAMPEL, DONALD F	<input type="checkbox"/> Delete
STREET ADDRESS 6969 WEST 90TH AVENUE, #927	
CITY-ST-ZIP WESTMINSTER CO 80021	
TITLE NAME D JAGGERS, KURT	<input type="checkbox"/> Delete
STREET ADDRESS 70 WILLOW ROAD, SUITE 100	
CITY-ST-ZIP MENLO PARK CA 94025	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1765 West 121st Ave	
CITY-ST-ZIP	
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1765 West 121st Ave	
CITY-ST-ZIP	
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 1765 West 121st Ave	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 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

1-9-02 (303) 223-5032
 Date Daytime Phone #

CR2E034 (9/01)