## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000002560

Entity Name: GALLOWAY, ROMERO AND ASSOCIATES, INC.

FILED Feb 08, 2006 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Plac	New Principal Place of Business:	
	PARKWAY OOD VILLAGI	E, CO 801113006			
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
	PARKWAY OOD VILLAG	E, CO 801113006			
FEI Number:	84-1072642	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address	s of New Registered Agent:	
	TH DADELAN	SERVICES, INC. ND BLVD., SUITE 15			
	named entity e of Florida.	submits this statement for the	purpose of changing its registe	ered office or registered agent, or both,	
SIGNATUF	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Can	npaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GALLOWAY, I 5350 DTC PAI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SCALES, JOH 5350 DTC PAI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	JONES, DAVII 5350 DTC PAI		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	GUETIG, DAVI 5350 DTC PAI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( SCHMIDTLEIN 5350 DTC PAI ENGLEWOOD	RKWAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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:	DAVID W. GALLOWAY	Р	02/08/2006