

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006140

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** AGRP MANAGEMENT CORP.

**Current Principal Place of Business:**

64 INVERNESS DRIVE EAST  
ENGLEWOOD, CO 80112

**New Principal Place of Business:**

**Current Mailing Address:**

64 INVERNESS DRIVE EAST  
ENGLEWOOD, CO 80112

**New Mailing Address:**

**FEI Number:** 36-4481137

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: C  
Name: ADAMS, STEPHEN  
Address: 2575 VISTA DEL MAR DRIVE  
City-St-Zip: VENTURA, CA 93001

Title: V  
Name: WOLFE, TOM  
Address: 2575 VISTA DEL MAR DR  
City-St-Zip: VENTURA, CA 93001

Title: PCEO  
Name: LEMONIS, MARCUS  
Address: 2575 VISTA DEL MAR DRIVE  
City-St-Zip: VENTURA, CA 93001

Title: S  
Name: JAMES, LAURA A  
Address: 2575 VISTA DEL MAR DRIVE  
City-St-Zip: VENTURA, CA 93001

I hereby 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 all other like empowered.

SIGNATURE: TOM WOLFE

V

04/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date