## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000000499

City-St-Zip:

BOULDER, CO 80301

Entity Name: AFFINITY TELECOM, INC.

FILED Mar 17, 2005 Secretary of State

•		, , , , , , , , , , , , , , , , , , , ,			
Current Principal Place of Business:			New Principal Place of Business:		
	NUT STREET R, CO 80301	Γ, SUITE 300			
Current Mailing Address:			New Mailing Address:		
4745 WAL BOULDER	NUT STREET R, CO 80301	Γ, SUITE 300			
FEI Number:	: 84-1610404	FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Statu	ıs Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
2731 EXEC SUITE 4	VICES, INC. CUTIVE PARI , FL 33331 L				
	named entity e of Florida.	submits this statement for the p	urpose of changing its registered office or registered	agent, or both,	
SIGNATUR					
Floation Car		nic Signature of Registered Agong Trust Fund Contribution ( ).	ent Date		
		• ,,			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title:	,	) Delete	Title: D (X) Change ( ) Addition	I	
Name:	STONE, RUSS		Name: STONE, RUSSELL A		
Address: City-St-Zip:	WESTMINSTE	19TH AVENUE R CO 80234	Address: 2724 WEST 119TH AVENUE City-St-Zip: WESTMINSTER, CO 80234		
Title: Name: Address: City-St-Zip:		) Delete ARLANE K OUD RD	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	CHERNOW, F	「ST, SUITE 300	Title: PCD (X) Change ( ) Addition Name: CHERNOW, FRED Address: 4745 WALNUT ST, SUITE 300 City-St-Zip: BOULDER, CO 80301	ı	
Title: Name:	GARRISON, G	) Delete ARY A	Title: ( ) Change ( ) Addition Name: Address:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: MARLANE K. TWIFORD ST 03/17/2005