


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2006 8:00 am
Secretary of State

06-05-2006 90152 003 ***550.00

DOCUMENT # F02000000851 1. Entity Name FDC ACQUISITION, INC.					
Principal Place of Business 5200 HAHNS PEAK DRIVE LOVELAND, CO 80538			Mailing Address 5200 HAHNS PEAK DRIVE LOVELAND, CO 80538		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Name Street Address (P.O. Box Number is Not Acceptable) City 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	VPS <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DONNAN, JAMES N		NAME		
STREET ADDRESS	2600 SOMERVILLE CT		STREET ADDRESS	5200 Hahns Peak Drive	
CITY-ST-ZIP	FT COLLINS, CO		CITY-ST-ZIP	LOVELAND, CO 80538	
TITLE	SVP <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NEIBERGER, TODD A		NAME		
STREET ADDRESS	8404 E. COUNTY RD 3		STREET ADDRESS	5200 Hahns Peak Drive	
CITY-ST-ZIP	FT COLLINS, CO		CITY-ST-ZIP	LOVELAND, CO 80538	
TITLE	P <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DONNAN, JERALD H		NAME		
STREET ADDRESS	6921 E COUNTY RD 54		STREET ADDRESS	5200 Hahns Peak Drive	
CITY-ST-ZIP	FT COLLINS, CO		CITY-ST-ZIP	LOVELAND, CO 80538	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Todd Neiberger</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			5-25-06 (970)663-5700 <small>Date Daytime Phone #</small>		

50020898



05222006 Chg-P CR2E034 (11/05)

4. FEI Number **84-1482387** Applied For ☐ Not Applicable ☒

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