2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005
Secretary of State

DOCUMENT# F03000000807

Entity Name: RISKCAP, INC.

Current Principal Place of Business:

1655 LAFAYETTE STREET
SUITE 200
DENVER, CO 80218

New Principal Place of Business:

Current Mailing Address:

1655 LAFAYETTE STREET
SUITE 200
DENVER, CO 80218

New Mailing Address:

FEI Number: 84-1152224 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	MURPHY, JOHN M	
Address:	3505 EAST FLORA PLACE	
City-St-Zip:	DENVER, CO 80210	
Title:	V	( ) Delete
Name:	POLING, RICHARD D	
Address:	4658 FIG STREET	
City-St-Zip:	GOLDEN, CO 80403	
Title:	V	( ) Delete
Name:	RUSH, WILLIAM D	
Address:	3643 W. ROSEWALK CIRCLE	
City-St-Zip:	HIGHLANDS RANCH, CO 80126	
Title:	T	( ) Delete
Name:	VERRIER, JEAN R	
Address:	1655 LAFAYETTE STREET, SUITE 200	
City-St-Zip:	DENVER, CO 80218	
Title:	S	( ) Delete
Name:	LEMERE, KIMBERLY A	
Address:	1655 LAFAYETTE STREET, SUITE 200	
City-St-Zip:	DENVER, CO 80218	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	KULYNYCH, STEVE	
Address:	5565 GLENRIDGE CONNECTOR	
City-St-Zip:	ATLANTA, GA 30342	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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.

SIGNATURE: STEVE KULYNYCH T 02/28/2005

Electronic Signature of Signing Officer or Director — Date