## **FILED** 2006 FOR PROFIT CORPORATION **ANNUAL REPORT** Jan 23, 2006 08:00 AN Secretary of State DOCUMENT # F03000005195 1. Entity Name AMSTAR PARTNERS, INC. Principal Place of Business Mailing Address 1050 17TH STREET, SUITE 1200 1050 17TH STREET, SUITE 1200 **DENVER, CO 80265** DENVER, CO 80265 01092006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 33-1063924 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 IN THIS SPACE 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

9. Election Campaign Financing

Added to Fees

Trust Fund Contribution.

(NOTE: Registured Agent signature required when ministating)		ÜWİF	
ımpaign Financing	\$5.00 May Be	11000000000000000000000000000000000000	

U00000394966

/26/06-80031-010 150.00

Applied For

Not Applicable

10.	OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FINKE, GABE L 1050 17TH STREET, SUITE 1200 DENVER, CO 80265	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST MARTIN, KEVIN J 1050 17TH STREET, SUITE 1200 DENVER, CO 80265	
TITLE NAME STREET ADDRESS GITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STHLET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY ST. ZIP		

Signature, typed or printed name of registered agent and title if applicable

## DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filling 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 received or trustee empowered to greatly 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

the obligations of registered agent.

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee will be \$550.00

ITED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin J. Martin, V. Pres. January 10, 2006

303-534-6322

Daytime Phone #