

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005448

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** PIE FORENSIC CONSULTANTS, INC.

**Current Principal Place of Business:**

6275 JOYCE DRIVE, STE. 200  
SUITE 200  
ARVADA, CO 80403 US

**New Principal Place of Business:**

**Current Mailing Address:**

6275 JOYCE DRIVE, STE. 200  
ARVADA, CO 80403 US

**New Mailing Address:**

**FEI Number:** 84-1503430

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITE, MELINDA  
967 COUNTRYSIDE WEST BOULEVARD  
PORT ORANGE, FL 32127 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: P  
Name: DUNCAN, PAUL M  
Address: 6275 JOYCE DRIVE, STE. 200  
City-St-Zip: ARVADA, CO 80403

Title: VP  
Name: BLACKMER, MATTHEW T  
Address: 6275 JOYCE DRIVE, STE. 200  
City-St-Zip: ARVADA, CO 80403

Title: S  
Name: SELLERS, CRAIG  
Address: 6275 JOYCE DRIVE, STE. 200  
City-St-Zip: ARVADA, CO 80403

Title: PRIN  
Name: AMHAUS, ERIC G  
Address: 6275 JOYCE DRIVE, STE. 200  
City-St-Zip: ARVADA, CO 80403

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: PAUL M. DUNCAN

P

05/01/2012

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

\_\_\_\_\_ Date