

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # F04000006329**

1. Entity Name  
**HOSPITALITY INSURANCE SERVICES, INC.**



Principal Place of Business

**304 CEDAR STREET  
STERLING, CO 80751**

Mailing Address

**304 CEDAR STREET  
STERLING, CO 80751**

**DO NOT WRITE IN THIS SPACE**



01142006 No Chg-P CR2E034 (11/05)

4. FEI Number  
**20-0729862**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE  
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 the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	DENNINGTON, GREGG
STREET ADDRESS	304 CEDAR STREET
CITY-ST-ZIP	STERLING, CO 80751
TITLE	VP
NAME	MCLAUGHLIN, JANET
STREET ADDRESS	304 CEDAR STREET
CITY-ST-ZIP	STERLING, CO 80751
TITLE	SD
NAME	DENNINGTON, LEEANN J
STREET ADDRESS	304 CEDAR STREET
CITY-ST-ZIP	STERLING, CO 80751
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

00000387689  
01/19/06-80048-024 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

*Gregg Dennington*

**GREGG DENNINGTON**

1-14-06

Date

970-522-7782

Daytime Phone #