

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001672

FILED
Jan 09, 2008
Secretary of State

Entity Name: MARSH & ASSOCIATES, INC., ARCHITECTURE/PLANNING/INTERIORS

Current Principal Place of Business:

383 INVERNESS PARKWAY, SUITE 190
ENGLEWOOD, CO 80112

New Principal Place of Business:

Current Mailing Address:

383 INVERNESS PARKWAY, SUITE 190
ENGLEWOOD, CO 80112

New Mailing Address:

FEI Number: 84-1357092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSH, IVAN
507 PALERMO BLVD
KISSIMMEE, FL 34759 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: PC () Delete
Name: MARSH, MICHAEL
Address: 383 INVERNESS PARKWAY, SUITE 190
City-St-Zip: ENGLEWOOD, CO 80112

Title: VPVC () Delete
Name: MARSH, PAULA
Address: 383 INVERNESS PARKWAY, SUITE 190
City-St-Zip: ENGLEWOOD, CO 80112

Title: D () Delete
Name: WEBB, BRYAN
Address: 383 INVERNESS PARKWAY, SUITE 190
City-St-Zip: ENGLEWOOD, CO 80112

Title: D () Delete
Name: KOSKOVICH, WILLIAM
Address: 383 INVERNESS PARKWAY, SUITE 190
City-St-Zip: ENGLEWOOD, CO 80112

Title: ST (X) Delete
Name: PARSONS, ROB CPA
Address: 385 INVERNESS PARKWAY, SUITE 275
City-St-Zip: ENGLEWOOD, CO 80112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: MARSH, MICHAEL S
Address: 383 INVERNESS PARKWAY, SUITE 190
City-St-Zip: ENGLEWOOD, CO 80112

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WEBB, BRYAN D
Address: 383 INVERNESS PARKWAY, SUITE 190
City-St-Zip: ENGLEWOOD, CO 80112

Title: ST (X) Change () Addition
Name: PARSONS, ROB L CPA
Address: 385 INVERNESS PARKWAY, SUITE 275
City-St-Zip: ENGLEWOOD, CO 80112

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL S. MARSH

PC

01/09/2008

Electronic Signature of Signing Officer or Director

Date