

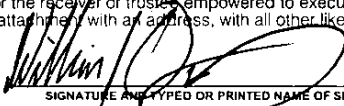


2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000001759						FILED 07 MAY -9 PM 1:03 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Entity Name HARDING PARK, INC.							
Principal Place of Business 400 EAST CARY STREET RICHMOND, VA 23219		Mailing Address 400 EAST CARY STREET RICHMOND, VA 23219					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		01242007 Chg-P CR2E034 (12/06)			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number APPLIED FOR		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip		Country		Zip		Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				FL		Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>			\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WALLIS, W. MARK 1745 SHEA CENTER DRIVE, SUITE 200 HIGHLANDS RANCH, CO 80129	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition William J. Overby 400 East Cary Street Richmond, VA 23219		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS TROUPE, WARREN L 370 17TH STREET, SUITE 5200 DENVER, CO 80202	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Teresa A. Porter 400 East Cary Street Richmond, VA 23219		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BELL, ERIC J 400 EAST CARY STREET RICHMOND, VA 23219	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500103016095 05/22/07--01025--007 **1050.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROBERTS, JUSTIN K 400 EAST CARY STREET RICHMOND, VA 23219	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AA GIANNOTTI, RICHARD A 400 EAST CARY STREET RICHMOND, VA 23219	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AA BOECKEL, LESTER C 1745 SHEA CENTER DRIVE, SUITE 200 HIGHLANDS RANCH, VA 23219	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: 				William J. Overby Assistant Vice President		4/26/07	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date</small>		<small>Daytime Phone #</small>	