


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 21, 2006 8:00 am
Secretary of State

08-21-2006 90003 002 ***158.75

DOCUMENT # F05000003607	
1. Entity Name TRIPLE CREEK ASSOCIATES, INC.	

Principal Place of Business 7730 E BELLEVIEW AVE. SUITE 200A GREENWOOD VILLAGE, CO 80111	Mailing Address 7730 E BELLEVIEW AVE. SUITE 200A GREENWOOD VILLAGE, CO 80111
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50025749



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

07312006 Chg-P CR2E034 (11/05)

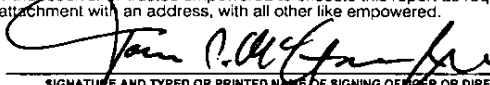
6. Name and Address of Current Registered Agent LOMBARDO, REEDIE % DISCOVERY OUTSOURCING, LLC 3165 N. ATLANTIC AVE. #A209 COCOA BEACH, FL 32931	
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7. Name and Address of New Registered Agent	
Name	GRAHAM, CHRISTIAN
Street Address (P.O. Box Number is Not Acceptable)	
5321 LEMON TWIST LANE	
City	WINDERMERE FL
Zip Code	34786

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	CHRISTIAN GRAHAM
(NOTE: Registered Agent signature required when reinstating)	
DATE	8/14/06

FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS EMELO, RANDY C 8872 EDINBURGH CIRCLE HIGHLANDS RANCH, CO 80129 <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	VT MCGEE, TOM JR. 8819 GREENSBOROUGH PLACE HIGHLANDS RANCH, CO 80129 <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	C MCSPARRAN, M. KENT 855 E. WESTGLOW LANE GREENWOOD VILLAGE, CO 80121 <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	VC DUNN, JOHN B 5521 S. HAWTHORNE CIRCLE GREENWOOD VILLAGE, CO 80121 <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	<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	<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:	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
DATE	8/14/06
Daytime Phone #	303.707.0800



ATTACHMENT

50025749

August 14, 2006

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Triple Creek Associates, Inc.
Ref. Number: F05000003607
Letter Number: ~~606A00047880~~

We did not receive notice that our annual report was due until July, 2006 which is after the due date, May 1, 2006. Therefore, we request that the late fee of \$400 be waived.

Tom C. McGee, Jr.
Vice President
Triple Creek Associates, Inc.
7730 E. Belleview Ave., Suite 200 A
Greenwood Village, CO 80111