

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90027 036 ***158.75

DOCUMENT # F05000003607

1. Entity Name
TRIPLE CREEK ASSOCIATES, INC.



40013539

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**



01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 31-1749398	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GRAHAM, CHRISTIAN
5321 LEMON TWIST LN
WINDERMERE, FL 34786**

**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

Christian Graham
CHRISTIAN GRAHAM

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

(NOTE: Registered Agent signature required when reinstating)

1/3/08
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	EMELO, RANDY C
STREET ADDRESS	8872 EDINBURGH CIRCLE
CITY-ST-ZIP	HIGHLANDS RANCH, CO 80129

TITLE	VT
NAME	MCGEE, TOM JR.
STREET ADDRESS	8819 GREENSBOROUGH PLACE
CITY-ST-ZIP	HIGHLANDS RANCH, CO 80129

TITLE	C.
NAME	MCSARRAN, M. KENT
STREET ADDRESS	855 E. WESTGLOW LANE
CITY-ST-ZIP	GREENWOOD VILLAGE, CO 80121

TITLE	VC
NAME	DUNN, JOHN B
STREET ADDRESS	5521 S. HAWTHORNE CIRCLE
CITY-ST-ZIP	GREENWOOD VILLAGE, CO 80121

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:

Tom P. McGee, Jr.
Tom P. McGee, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/08
Date

303-707-0800
Daytime Phone #