

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6384

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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TALLAHASSEE, FLORIDA

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CORPORATION REINSTATEMENT
NEIDIGER, TUCKER, BRUNER, INC.


Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,800.00

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S. PRATHER

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F05000004752					
1. Corporation Name Neidiger, Tucker, Bruner, Inc.					
2. Principal Office Address - No P.O. Box # 9540 S. Maroon Circle Bldg, Apt. #, etc. Ste 250 City & State Englewood CO zip 80112			3. Mailing Office Address Same Bldg, Apt. #, etc. City & State Country USA		
4. Date Incorporated or Qualified To Do Business in Florida 8/15/2005			5. FEIN/IDBY 840735234		
6. CERTIFICATE OF STATUS DESIRED			7. Additional Fee required for Certificate of Status		
7. Name and Address of Current Registered Agent					
Name C.T. Corporation System					
Street Address (P.O. Box Number is Not Acceptable) 1700 South Pine Island Road					
Bldg, Apt. #, etc.					
City Plantation		State FL	zip Code 33324		
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 007.0605 or 017.0503, F.S.					
Signature of Registered Agent <i>[Signature]</i>		Name James D. Martin Asst. Vice President		Date 9/26/13	
REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
	See Attached				
10. E-mail Address: <u>sgillessie@ntbina.com</u>					
[To be used for future annual report notification]					
11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 017 or 017, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 007.0401 or 017.0401, F.S., and that all fees owed by the corporation have been paid. Further, certify the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted as a document to the Department of State constitutes a third degree felony as provided for in 017.188, F.S.					
SIGNATURE: <i>[Signature]</i>		Date 9/25/13		303-825-1825	

REINSTATEMENT

010-13

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TALLAHASSEE, FLORIDA

**Neldiger, Tucker, Bruner, Inc.
Officers and Directors
September 20, 2013**

**Eugene Neldiger- Chairman
9540 S. Maroon Circle, Ste. 250
Englewood, CO 80112**

**Anthony Petrelli- President and Director
9540 S. Maroon Circle, Ste. 250
Englewood, CO 80112**

**Regina Roesener- Secretary and Director
9540 S. Maroon Circle, Ste. 250
Englewood, CO 80112**

**Michael Morgan- Director
9540 S. Maroon Circle, Ste. 250
Englewood, CO 80112**

**Scott Gillespie- Chief Financial Officer
9540 S. Maroon Circle, Ste. 250
Englewood, CO 80112**