

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001936

FILED  
Mar 09, 2007  
Secretary of State

Entity Name: NIA CORPORATION

**Current Principal Place of Business:**

274 UNION BLVD  
SUITE 450  
LAKEWOOD, CO 80228

**New Principal Place of Business:**

**Current Mailing Address:**

274 UNION BLVD  
SUITE 450  
LAKEWOOD, CO 80228

**New Mailing Address:**

FEI Number: 84-1254829      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLANTON, EDWIN F  
810 THOMASVILLE ROAD  
TALLAHASSEE, FL 32303      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: BOWLES, JAMES O  
Address: 274 UNION BLVD #450  
City-St-Zip: LAKEWOOD, CO 80228

Title: VP ( ) Delete  
Name: WARD, DAVID W  
Address: 274 UNION BLVD #450  
City-St-Zip: LAKEWOOD, CO 80228

Title: S ( ) Delete  
Name: HARTMAN, LORI  
Address: 274 UNION BLVD #450  
City-St-Zip: LAKEWOOD, CO 80228

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID W. WARD

VP

03/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date