## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000003680

Entity Name: STORAGETEK FINANCIAL SERVICES CORPORATION

FILED Jan 14, 2005 Secretary of State

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
	TH MCCASLIN E 2, CO 80027	BLVD. US				
Current Mailing Address:			New Mai	New Mailing Address:		
1000 SOUTH MCCASLIN BLVD. SUPERIOR, CO 80027 US						
FEI Number: 84-1252056 FEI Number Applied For ( ) FEI N		FEI Number Not Ap	Imber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US						
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:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VP () D GOTTWALS, CLII 1000 SOUTH MC SUPERIOR, CO	CASLIN BLVD.	Title: Name: Address: City-St-Zip:	GOTTWALS, C 1000 SOUTH N	MCCASLIN BLVD.	
Title: Name: Address: City-St-Zip:	S () C EARLY, JEANNE 1000 S. MCCASL SUPERIOR, CO	IN BLVD	Title: Name: Address: City-St-Zip:		) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	AS () D NANCE, JENNIFE 1000 SOUTH MC SUPERIOR, CO	CASLIN BLVD.	Title: Name: Address: City-St-Zip:		) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SVP () D EVANS, JOHN A 1000 SOUTH MC SUPERIOR, CO	CASLIN BLVD.	Title: Name: Address: City-St-Zip:	PAINE, AMY 1000 SOUTH N	() Change()Addition MCCASLIN BLVD. O 80027	
Title: Name: Address: City-St-Zip:	PD () D KARSON, KAREN 1000 S MCCASLI SUPERIOR, CO	N BLVD	Title: Name: Address: City-St-Zip:	(	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () D SCHULTZ, PHILIF 1000 S MCCASLI SUPERIOR, CO	N BLVD	Title: Name: Address: City-St-Zip:	POTTHOFF, B 1000 S MCCA	SLIN BLVD	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JEANNE L. EARLY S 01/14/2005