

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90362 043 ***150.00

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F99000000840**

Entity Name
DANIELS PETROLEUM COMPANY

1. Principal Place of Business

717 17TH STREET, STE 1545
DENVER CO 80202

2. Mailing Address

717 17TH STREET, STE 1545
DENVER CO 80202

3. Principal Place of Business

4. Mailing Address

State, Apt. #, etc.

Suite, Apt. #, etc.

City

City & State

4. FEI Number

84-0958779

Applied For

Not Applied

Zip

Country

Zip

Country

5. Certificate of Status Desired

Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RUSH, RANDOLPH J
250 PARK AVENUE SOUTH 5TH FL
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Print name in printed form of registered agent on this application

(NOTE: Registered Agent Signature Required when Filing)

DATE

9. This corporation is eligible to satisfy its intangible tax obligations by filing a return with the Department of Banking and Finance, P.O. Box 10000, Tallahassee, Florida 32304-0000.

FILE NOW!!! FEE IS \$150.00

Make Check Payable to Department of State

10. Election Campaign Financing

May Be

Required for Candidates for Office of State Representative, State Senator, or State Commissioner of Education

OFFICERS AND DIRECTORS

ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

NAME	DELETE	CHANGE	ADD
TITLE: PTDS NAME: BAKER, BARRETT D STREET ADDRESS: 717 17TH STREET, STE 1545 CITY-STATE-ZIP: DENVER CO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TITLE: S NAME: PAGE, SHERRY L STREET ADDRESS: 3760 W 84TH AVE #29 CITY-STATE-ZIP: WESTMINSTER CO 80031	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby certify that the information supplied with this filing complies for quality with the requirements of Section 119.07(3)(b), 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 reporting as provided by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 of this report as an attachment with an address, with all other like attachments.

SIGNATURE: *Barrett D Baker* April 24, 2002 303 399 1434 SE
DATE: *April 24, 2002* 293-9200