


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90035 027 ***150.00

DOCUMENT # F99000003857					
1. Entity Name ARC DEALERSHIP, INC.					
Principal Place of Business 600 GRANT ST. STE 900 DENVER, CO 80203			Mailing Address 600 GRANT ST. STE 900 DENVER, CO 80203		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 84-1465883	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET. TALLAHASSEE, FL 32301-2525			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	JACKSON, SCOTT D		NAME		
STREET ADDRESS	600 GRANT STREET SUITE 900		STREET ADDRESS		
CITY-ST-ZIP	DENVER, CO 80203		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FRENCH, MARY		NAME		
STREET ADDRESS	600 GRANT ST., SUITE 900		STREET ADDRESS		
CITY-ST-ZIP	DENVER, CO 80203		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SPRENGLE, JOHN G		NAME		
STREET ADDRESS	600 GRANT ST., SUITE 900		STREET ADDRESS		
CITY-ST-ZIP	DENVER, CO 80203		CITY-ST-ZIP		
TITLE	VS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GESELL, SCOTT L		NAME		
STREET ADDRESS	600 GRANT ST., SUITE 900		STREET ADDRESS		
CITY-ST-ZIP	DENVER, CO 80203		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	VT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KREIDER, LAWRENCE		NAME		
STREET ADDRESS	600 GRANT ST., SUITE 900		STREET ADDRESS		
CITY-ST-ZIP	DENVER, CO 80203		CITY-ST-ZIP		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VANDERHOOFVON, SCOTT		NAME	Frank McDonald	
STREET ADDRESS	600 GRANT ST., SUITE 900		STREET ADDRESS	600 Grant Street, Suite 900	
CITY-ST-ZIP	DENVER, CO 80203		CITY-ST-ZIP	Denver, CO 80203	
12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____			2/1/05		(303) 291-0222
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>