

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2005 8:00 am**  
**Secretary of State**

01-18-2005 90182 009 \*\*\*150.00

**DOCUMENT # M02000003318**

1. Entity Name  
**SOLUNET LLC**



Principal Place of Business  
**1675 BROADWAY, SUITE 900  
DENVER, CO 80202**

Mailing Address  
**1675 BROADWAY, SUITE 900  
DENVER, CO 80202**



01032005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**42-1558123**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

**NATIONAL REGISTERED AGENTS INC  
526 EAST PARK AVENUE  
TALLAHASSEE, FL 32301**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
MARABITO, ALLEN J  
1675 BROADWAY, SUITE 900  
DENVER, CO 80202**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
DANITZ, SCOTT R  
1675 BROADWAY, SUITE 900  
DENVER, CO 80202**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
SARACCO, MICHAEL A  
1675 BROADWAY, SUITE 900  
DENVER, CO 80202**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

*Scott Danitz*

**Scott Danitz**

**1-5-05**

**303-292-4973**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #