

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 15, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # M03000000869**

1. Entity Name  
OPTION CARD, LLC



Principal Place of Business  
600 17TH STREET, SUITE 800 N  
DENVER, CO 80202

Mailing Address  
600 17TH STREET, SUITE 800 N  
DENVER, CO 80202



02032006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
74-3073803

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

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

LEXISNEXIS DOCUMENT SOLUTIONS INC.  
1201 HAYS STREET  
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

2-6-06

**Filing Fee is \$50.00  
Due by May 1, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE MGR  
NAME GABRIEL, DAVID H  
STREET ADDRESS 600 17TH ST. SUITE 800 NORTH  
CITY-ST-ZIP DENVER, CO 80202

TITLE MGR  
NAME MACHOL, JACQUES A III  
STREET ADDRESS 600 17TH ST. SUITE 800 NORTH  
CITY-ST-ZIP DENVER, CO 80202

TITLE  
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CITY-ST-ZIP

000000434490  
02/25/06-00004-007 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**

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

Date

Daytime Phone #

2-6-06

303 539-3162