2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M03000001006



FILED Mar 24, 2006 8:00 am Secretary of State 03-24-2006 90222 010 ****50.00

WICKOSTAR REG WANAGWENT, L.L.C.										
Principal Place of Business 5613 DTC PARKWAY SUITE #1100 GREENWOOD VILLAGE, CO 80111		Mailing Address 5613 DTC PARKWAY SUITE #1100 GREENWOOD VILLAGE, CO 80111			i (C1)30 11 ili	A OLGO IIIII O EIIH O EIGI A OIG		20020 		
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03092006	Chg-LLC	CR2E08	3 (11/05)		
City & State		City & State			4. FEI Number 91-173			_ 	plied For	
Zip	Country	Zip	Country			of Status Desired		5.00 Add	itional	
	6. Name and Address of Current F	Registered Agent			7. Name and	Address of New Re				
- 100				Name						
1200 S. Pil	DRATION SYSTEM NE ISLAND ROAD ON, FL 33324	Street Address			(P.O. Box Number is Not Acceptable)					
, 5	5.11, 1 2 332 1									
			City				FL	Zip Code	;	
	named entity submits this statement for ions of registered agent.	the purpose of changing its r	egistered office of	r registere	d agent, or bot	th, in the State of Flo	rida. I am fa	ımiliar with,	and accept	
SIGNATURE.	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signat	ure required v	when reinstating)		DATE		-,-	
		••								
Fillng Fee is \$50.00 Due by May 1, 2006		· · · · · · · · · · · · · · · · · · ·		, I			check pa Departme	yable to int of State	,	
9.	MANAGING MEMBEI	RS/MANAGERS	10.		L	ADDITIONS/	CHANGES			
TITLE '77.	MGR	Delete	TITLE		· · · · · · · · · · · · · · · · · · ·			☐ Change	Addition	
NAME	CRONIN, GREG		NAME						_	
STREET ADDRESS	5613 DTE PARKWAY SUITE 110	0	STREET ADDRESS							
CITY-ST-ZIP	ENGLEWOOD, CO 80111	·	CITY-ST-ZIP			•				
TITLE	MGR	Delete	TITLE					Change	☐ Addition	
NAME	STOUDERMIRE, STAN	•	NAME						ļ	
STREET ADDRESS CITY-ST-ZIP	5613 DTC PARKWAY SUITE 110 ENGLEWOOD, CO 80111	0	STREET ADDRESS CITY-ST-ZIP	•						
	ENGLEVVOOD, CO 60111	Delete	TITLE	441.1	D	.41 /11		☐ Change	▼ Addition	
TITLE NAME		LT Delete	NAME	MISH	ABITATE	kwy Mgr		Change	EST AUDITION	
STREET ADDRESS			STREET ADDRESS	ا الحاد انماڪ	te lloo	~~ y	_			
CITY-ST-ZIP	•		CITY-ST-ZIP	CAL6	en wood	Village, Co	801	H	-	
TITLE		☐ Delete	TITLE	Davic	Webste	er /Mgr Kwy		☐ Change	Addition 🔀	
NAME			NAME	5613	DTC P	kwy "			•	
STREET ADDRESS			STREET ADDRESS	Sui	le 1100	,	0	•		
CITY-ST-ZIP			CITY-ST-ZIP	Gree	mosod V	illage, co	8011			
TITLE	}	☐ Delete	NAME			•		☐ Change	Addition	
name Street address	6.5.		STREET ADDRESS							
CITY-ST-ZIP		. •	CITY-ST-ZIP	l					r	
****		☐ Delete	TITLE	ļ		, ,		Change .	Addition	
NAME			NAME			•		_ onengo _		
STREET ADDRESS	3.		STREET ADDRESS			, , " ;				
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,		CITY-ST-ZIP					· ·		
11. I hereby	certify that the information supplied with	this filing does not qualify for	the exemptions co	ontained in	n Chapter 119,	Florida Statutes. I fu	rther certify	that the into	rmation-	

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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAVE OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

303-468-9453