2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT

MMF

NAME

STREET ADDRESS

CITY-ST-ZIP

Apr 26, 2005 8:00 am Secretary of State **DOCUMENT # M04000001902** 04-26-2005 90021 044 ****50.00 AIMBRIDGE FINANCIAL SERVICES, LLC Principal Place of Business Mailing Address 4610 S. ULSTER STREET, SUITE 300 4610 S. ULSTER STREET, SUITE 300 **DENVER, CO 80237 DENVER, CO 80237** 2. Principal Place of Business 3. Mailing Address Suite Ant # etc. Suite, Apt. #, etc. 01072005 Cha-LLC CR2E083 (10/03) City & State City & State Applied For 4. FEI Number 75-3097958 Not Applicable Country \$5.00 Additional Zip_ Country 5. Certificate of Status Desired: Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City 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 Signature, typed or printed name of registered agent and the flappicable. (NOTE: Registered Agent signature required when reinstaling) Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGR TILE ☐ Delete ☐ Change Addition DΠE BENTLEY, STEPHEN A NAME STREET ADDRESS 4610 S. ULSTER STREET, SUITE 300 STREET ADDRESS CITY-ST-ZIP **DENVER, CO 80237** CITY-ST-ZIP MGR TILE Delete ПΉΕ Change Addition BENTLEY, LESLIE V NAME NAME STREET ADDRESS 4610 S. ULSTER STREET, SUITE 300 STREET ADDRESS **DENVER, CO 80237** COY+ST-7P CCTY, ST. 7IP MGR TITLE Delete TITLE ☐ Change ☐ Addition NAME SCHMITT, ANN NAME STREET ADDRESS 4610 S. ULSTER STREET, SUITE 300 STREET ADDRESS CITY-ST-ZIP **DENVER, CO 80237** CITY-ST-ZIP Delete TITLE MGR TITLE ☐ Change ☐ Add tion NAME HARRIS, ANDREA NAME STREET ADORESS 4610 S. ULSTER STREET, SUITE 300 STREET ADDRESS CITY-ST-ZIP **DENVER, CO 80237** CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ■ Addition SHAFFER, TERESA M NAME NAME STREET ADDRESS 4610 S. ULSTER STREET, SUITE 300 STREET ADDRESS CITY-ST-7IP DENVER, CO 80237 CITY-ST-77P

FILED

☐ Change

Addition

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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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SIGNATURE:	Leres a haffyr	4/13/05	303495100S
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	Daytime Phone #