- 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## May 30, 2006 8:00 am Secretary of State DOCUMENT # M05000002324 04-28-2006 90018 035 \*\*\*\*55.00 AINSWORTH HOLDINGS LLC Principal Place of Business Mailing Address 6560 VINE COURT DENVER CO 80229 6560 VINE COURT **DENVER CO 80229** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) Applied For City & State City & State 4. FEI Number 20-2699097 Not Applicable Country Zip Country Zip \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent a and Address of Current Registered Agent 5. P Scott 57TEST City DA. 8. The above named earlity 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 (NOTE: Resistered Agent signature required when reinstating FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State . ... Due By May.1°2006 ~-MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. Addition TITLE MGR Delete TITLE ☐ Change NAME ainsworth, leslie è NAME STREET ADDRESS STREET ADDRESS 6560 VINE COURT CITY-ST-ZIP DENVER CO 80229 CITY-ST-ZIP TITLE ☐ Deteta Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete MILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS C(TY-ST-78P CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZIP CIFY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-70P CITY-ST-72P TITLE Delete mie ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 receipt or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREATHER AND THEED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Davime Phone #

**FILED**