

**2003 LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

04-07-2003 90609 024 \*\*\*\*50.00

**DOCUMENT # M97000000138**

1. Entity Name  
**CENTERPOINT FINANCIAL SERVICES, LLC**



Principal Place of Business      Mailing Address  
**1675 LARIMER STREET, SUITE 880**      **1675 LARIMER STREET, SUITE 880**  
**DENVER CO 80202**      **DENVER CO 80202**

2. Principal Place of Business      3. Mailing Address  
*1675 Larimer St*      *1675 Larimer St*  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
*Suite 500*      *Suite 500*

City & State      City & State  
*Denver CO*      *Denver CO*  
 Zip      Zip      Country      Country  
*80202*      *80202*      *USA*      *USA*

4. FEI Number      Applied For  
**84-1374440**      Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent  
**C.T. CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

7. Name and Address of New Registered Agent  
 Name \_\_\_\_\_  
 Street Address (P.O. Box Number Is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ **FL** 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 the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MEM</b> <b>OTTO, JOHN W</b> <b>49180 SUNROSE LANE</b> <b>PALM DESERT CA 92280</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MEM</b> <b>OTTO, KATHLEEN J</b> <b>49180 SUNROSE LANE</b> <b>PALM DESERT CA 92280</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del><b>MGRM</b> <b>ROBERTS, GORDON R</b> <b>1675 LARIMER STREET, SUITE 880</b> <b>DENVER CO 80202</b></del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM</b> <b>SCHIELL, CHARLES R</b> <b>1675 LARIMER STREET, SUITE 880</b> <b>DENVER CO 80202</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del><b>MGRM</b> <b>ESTES</b> <b>1675 LARIMER STREET, SUITE 880</b> <b>DENVER CO 80202</b></del> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *Ronald L. Wagner*      Date: *4/2/03*      Daytime Phone #: *303-592-6116*

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

CR2E083 (10/02)