2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2005
Secretary of State

DOCUMENT# P20787

Entity Name: BOULDER ASSOCIATES, A PROFESSIONAL CORPORATION

Current Principal Place of Business:

4747 TABLE MESA DR. #202
BOULDER, CO 803035573

New Principal Place of Business:

Current Mailing Address:

4747 TABLE MESA DR. #202
BOULDER, CO 803035573

New Mailing Address:

FEI Number: 84-0817826 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: OWENS, ROBERT G., II, I
Address: 1942 TIMBER LANE
City-St-Zip: BOULDER, CO 80304

Title: VD ( ) Delete
Name: MULFORD, CRAIG,
Address: 693 W SAGEBRUSH DRIVE
City-St-Zip: LOUISVILLE, CO 80027

Title: D ( ) Delete
Name: REHNBERG, NICHOLAS J.
Address: 850 13TH STREET
City-St-Zip: BOULDER, CO

Title: D ( ) Delete
Name: BOERS, TIMOTHY C.
Address: 2558 W. 32ND AVENUE
City-St-Zip: DENVER, CO

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT G. OWENS III PD 03/11/2005

Electronic Signature of Signing Officer or Director — Date