

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000011560

FILED  
Feb 22, 2006  
Secretary of State

Entity Name: GRS WEST FLORIDA, INC.

**Current Principal Place of Business:**

3300 S PARKER ROAD  
SUITE 310  
AURORA, CO 80014 US

**New Principal Place of Business:**

**Current Mailing Address:**

3300 S PARKER ROAD  
STE 310  
AURORA, CO 80014 US

**New Mailing Address:**

FEI Number: 65-0398256      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DAS ( ) Delete  
Name: BARRICKMAN, DONALD F  
Address: 3300 S PARKER RD., STE. 310  
City-St-Zip: AURORA, CO 80014 US

Title: DAT ( ) Delete  
Name: DIETRICH, W. RANDALL  
Address: 3300 S. PARKER RD STE 310  
City-St-Zip: AURORA, CO 80014 US

Title: D ( ) Delete  
Name: ROGGENSACK, BARTLEY E JR  
Address: 3300 S PARKER RD, STE. 310  
City-St-Zip: AURORA, CO 80014 US

Title: TAS ( ) Delete  
Name: HASTINGS, ANN D  
Address: 3300 S PARKER RD, STE 310  
City-St-Zip: AURORA, CO 80014 US

Title: AT ( ) Delete  
Name: POSSEHL, ROBERT S  
Address: 3300 S PARKER ROAD STE 310  
City-St-Zip: AURORA, CO 80014 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: P (X) Change ( ) Addition  
Name: POSSEHL, ROBERT S  
Address: 3300 S PARKER RD, STE. 310  
City-St-Zip: AURORA, CO 80014 US

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 Chapter 119, 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: ANN D. HASTINGS

Electronic Signature of Signing Officer or Director

TAS

02/22/2006

\_\_\_\_\_ Date