2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P94000004186

1. Entity Name
HALLMARK BUSINESS CONSULTANTS INCORPORATED

FILED
06 JUN 27 AM 11:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1979 ANTELOPE AVE PAGOSA SPRINGS, CO 81147 US	1979 ANTELOPE AVE PAGOSA SPRINGS, CO 81147 US

05262006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
33 Ophir Dr Suite, Apt. #, etc.	33 Ophir Dr Suite, Apt. #, etc.
City & State: DURANGO CO	City & State: DURANGO CO
Zip: 81301 Country: La Plata	Zip: 81301 Country: La Plata

4. FEI Number 65-0461737 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROBINSON, RICHARD 3671 MUIRFIELD DRIVE SARASOTA, FL 34238	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: Lauren A. Hall, Pres — 6-21-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HALL, LAUREN A 1979 ANTELOPE AVE PAGOSA SPRINGS, CO 81147	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Lauren A. Hall 33 Ophir Drive Durango, CO 81301	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	6/29	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	900077084409 07/06/06--01044--013 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lauren A. Hall LAUREN A HALL 6-21-06 970 259-7766
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #