<ul> <li>Document processing fee If document is filed on paper If document is filed electronically</li> <li>Late fee if entity is in noncompliant status If document is filed on paper If document is filed electronically</li> <li>Fees &amp; forms/cover sheets are subject to change.</li> <li>To file electronically, access instructions for this form/cover sheet and other information or print copies of filed documents, visit <u>www.sos.state.co.us</u> and select Business Center.</li> <li>Paper documents must be typewritten or m</li> </ul>	\$ 50.00 \$ <b>40.00</b> nachine printed. Annual Repor	Colorado Secretary of State Date and Time: 12/30/2008 04:40 PM ID Number: 19991238303 Document number: 20081670738 Amount Paid: \$10.00 ABOVE SPACE FOR OFFICE USE ONLY t he Colorado Revised Statutes (C.R.S)			
ID number:	19991238303				
Entity name:	3320 BURNS, LI	LC			
Jurisdiction under the law of which the entity was formed or registered:	Colorado				
1. Principal office street address:	155 W. Harvard St. Suite 202 (Street name and number)				
	FORT COLLINS	CO 80525			
	(City) (Province – if applica	$\frac{(State)}{(Dited States)} (Postal/Zip Code)}{(Country - if not US)}$			
2. Principal office mailing address: (if different from above)	(Street name and number or Post Office Box information)				
	(City)	(State) (Postal/Zip Code)			
3. Registered agent name: (if an individual)	COX SHAWNA				
<b>OR</b> (if a business organization)	(Last)	(First) (Middle) (Suffix)			

4. The person identified above as registered agent has consented to being so appointed.

5. Registered agent street address:	155 W. Harvard St. S	arvard St. Suite 202 (Street name and number)		
	FORT COLLINS (City)	<u> </u>	0525 (Postal/Zip Code)	
6. Registered agent mailing address: (if different from above)	(Street name and number or Post Office Box information)			
	(City)	(State)	(Postal/Zip Code)	
	(Province – if applicable)	(Country – if not U	$\overline{S})$	

## Notice:

Causing this document to be delivered to the secretary of state for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the secretary of state, whether or not such individual is named in the document as one who has caused it to be delivered.

7. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:	Cox	Shawna			
	(Last)	(First)	(Middle) (Suffix)		
	155 W. Harvard St. Suite 202				
	(Street name and number or Post Office Box information)				
	Ft. Collins	CO 80525			
	(City)	United States	(Postal/Zip Code)		
	(Province – if applicable)	(Country – if not US)			

(The document need not state the true name and address of more than one individual. However, if you wish to state the name and address of any additional individuals causing the document to be delivered for filing, mark this box and include an attachment stating the name and address of such individuals.)

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