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If document is filed on paper

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documents, visit www.sos.state.co.us

and select Business Center.

Colorado Secretary of State

Date and Time: 01/07/2009 01:53 PM

ID Number: 20031376329

Document number: 20091015563

Amount Paid: \$10.00

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Annual Report

filed pursuant to §7-90-301, et seq. and §7-90-501 of the Colorado Revised Statutes (C.R.S)

ID number:	20031376329					
Entity name:	FRONT RANGE SURGICAL SERVICES, P.C.					
Jurisdiction under the law of which the entity was formed or registered:	Colorado					
1. Principal office street address:	9397 CROWN CRE	ST BLVD S				
	PARKER	СО	80138			
	(City)	(State)		Postal/Zip Code)		
	(Province – if applicable)		- if not US)			
2. Principal office mailing address: (if different from above)	(Street name and number or Post Office Box information)					
	(City)	(State)	(F	Postal/Zip Code)		
	(Province – if applicable)	(Country	- if not US)			
3. Registered agent name: (if an individual)	BARNES	STEPHEN	M			
OR (if a business organization)	(Last)	(First)	(1	Middle)	(Suffix	

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

5. Registered agent street address:	17354 E WEAVER	DR				
	(Street name and number)					
	AURORA	CO	80016			
	(City)	(State)	(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 r	not US)			
Notice:						
person on whose behalf the individual is with the requirements of part 3 of article statutes, and that the individual in good document complies with the requirement. This perjury notice applies to each individual is remarked.	e 90 of title 7, C.R.S., the confaith believes the facts state atts of that Part, the constitued ridual who causes this documents of the constituence of the cause of the caus	onstituent documed in the docume ent documents, and ment to be delivered.	ents, and the organic nt are true and the and the organic statutes.			
7. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:	Barnes	Stephen	M			
to be delivered for fiffing.		<u> </u>				
Č	9397 Crown Crest	(First)	(Middle) (Suffix			
J	9397 Crown Crest	' '				
	9397 Crown Crest (Street name a	Blvd nd number or Post Off				
J	9397 Crown Crest Ste. 210	Blvd nd number or Post Off	ice Box information) 80138 (Postal/Zip Code)			

Disclaimer:

name and address of such individuals.)

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of any additional individuals causing the document to be delivered for filing, mark this box $\$ and include an attachment stating the