

2007 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 03, 2007 8:00 am
Secretary of State

04-03-2007 90018 048 ***150.00

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1. Entity Name
LACHEL & ASSOCIATES, INC.



Principal Place of Business
**130 SOUTH DEFRAME WAY
GOLDEN, CO 80401**

Mailing Address
**P.O. BOX 5266
GOLDEN, CO 80401**

40049253



2. Principal Place of Business - No P.O. Box #
1667 Cole Boulevard

3. Mailing Address

Suite, Apt. #, etc.
Suite 220

Suite, Apt. #, etc.

City & State
Golden, CO

City & State

Zip
80401

Country
USA

Zip

Country

03272007 Chg-P CR2E034 (12/06)

4. FEI Number
22-2626176

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**AGENTS AND CORPORATIONS
SUITE E, 773 4TH AVENUE NORTH
NAPLES, FL 34102**

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
LACHEL, KATHRYN A
130 SOUTH DEFRAME WAY
GOLDEN, CO 80401** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
AUGLIS, DEBRA A
5667 SOUTH ROBB STREET
LITTLETON, CO 80127** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
FELICE, CONRAD W
14150 227TH AVENUE NE
WOODINVILLE, WA 98072** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
LINAMEN, C. RICHARD
3212 TITANIC DRIVE
STAFFORD, VA 22554** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Chairman of the Board
Gordon Matheson
9144 Rigney Terrace
Glen Allen, VA 23060** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Vice President of Operations
/Secretary** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Vice President/Director
David R. Chapman
17 Corn Hill Drive
Morristown, NJ 07960** ☐ Change ☒ Addition

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: *Debra A. Auglis* **Debra A. Auglis**

3/27/2007

303-279-4321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #