

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22189

FILED
May 01, 2007
Secretary of State

Entity Name: GEA POWER COOLING, INC.

Current Principal Place of Business:

143 UNION BOULEVARD
STE 400
LAKEWOOD, CO 80228 US

New Principal Place of Business:

Current Mailing Address:

143 UNION BOULEVARD
STE 400
LAKEWOOD, CO 80228 US

New Mailing Address:

FEI Number: 51-0268494 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: HEBERT, RICHARD
Address: 143 UNION BLVD #400
City-St-Zip: LAKEWOOD, CO 80228

Title: P () Delete
Name: MILLER, PETER CEO
Address: 143 UNION BLVD. SUITE 4000
City-St-Zip: LAKEWOOD, CO 80228

Title: T () Delete
Name: WERGES, CYNTHIA J CFO
Address: 143 UNION BLVD #400
City-St-Zip: LAKEWOOD, CO 80228

Title: D () Delete
Name: SCHMALE, HELMUT
Address: DORSTENER STRASSE 484
City-St-Zip: BOCHUM GERMANY, GR D-4488

Title: D () Delete
Name: PFLEGER, DIDIER
Address: DORSTENER STRASSE 484
City-St-Zip: BOCHUM GERMANY, GR D-4488

Title: S () Delete
Name: HORN, CHRISTIE VP
Address: 143 UNION BLVD #400
City-St-Zip: LAKEWOOD, CO 80228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: CYNTHIA WERGES

CFO

05/01/2007

Electronic Signature of Signing Officer or Director

_____ Date