



Colorado Secretary of State  
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**Periodic Report**

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

ID number: 20181245659

Entity name: Fire Adapted Bailey

Jurisdiction under the law of which the  
 entity was formed or registered: Colorado

1. Principal office street address: 162 Ox Yoke Ln  
*(Street name and number)*

Bailey CO 80421  
*(City) (State) (Postal/Zip Code)*  
United States  
*(Province – if applicable) (Country – if not US)*

2. Principal office mailing address:  
 (if different from above) PO Box 465  
*(Street name and number or Post Office Box information)*

Pine CO 80470  
*(City) (State) (Postal/Zip Code)*  
United States  
*(Province – if applicable) (Country – if not US)*

3. Registered agent name: (if an individual) Davis Robin  
*(Last) (First) (Middle) (Suffix)*

or (if a business organization) \_\_\_\_\_

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

5. Registered agent street address: 162 Ox Yoke Ln  
*(Street name and number)*

Bailey CO 80421-1022  
*(City) (State) (Postal/Zip Code)*

6. Registered agent mailing address:  
 (if different from above) 162 Ox Yoke Ln  
*(Street name and number or Post Office Box information)*

BAILEY CO 80421  
*(City) (State) (Postal/Zip Code)*  
United States  
*(Province – if applicable) (Country – if not US)*

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7. Name(s) and address(es) of the individual(s) causing the document to be delivered for filing:

|  |                |                              |                 |
|--|----------------|------------------------------|-----------------|
| <b>Davis</b>   | <b>Robin</b>   |                              |                 |
| <i>(Last)</i>  | <i>(First)</i> | <i>(Middle)</i>              | <i>(Suffix)</i> |
| <b>162 Ox Yoke Ln</b>  |                |                              |                 |
| <i>(Street name and number or Post Office Box information)</i> |                |                              |                 |
| <hr/>  |                |                              |                 |
| <b>BAILEY</b>  | <b>CO</b>      | <b>80421</b>                 |                 |
| <i>(City)</i>  | <i>(State)</i> | <i>(Postal/Zip Code)</i>     |                 |
| <b>United States</b>   |                |                              |                 |
| <i>(Province – if applicable)</i>                              |                | <i>(Country – if not US)</i> |                 |

*(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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