

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**May 15 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION  
ANNUAL REPORT  
1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 857185 (3)**

**1. Corporation Name  
FISCHBACH PROPERTIES, INC.**



Principal Place of Business  
**2775 S. Vallejo St.  
ENGLEWOOD CO 80110  
US**

Mailing Address  
**2775 S. Vallejo St.  
ENGLEWOOD CO 80110-1226  
US**

<b>3. Date Incorporated or Qualified</b> 07/22/1983	<b>3a. Date of Last Report</b> 04/20/1996
<b>4. FEI Number</b> 13-3136937	Applied For Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
<b>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

<b>2. Principal Place of Business</b>	<b>2a. Mailing Address</b>
<b>21</b> Suite, Apt. #, etc.	<b>26</b> Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Zip
<b>24</b> Country	<b>29</b> Country
<b>25</b>	<b>30</b>

<b>9. Name and Address of Current Registered Agent</b>	<b>10. Name and Address of New Registered Agent</b>
<b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324</b>	<b>81</b> Name
	<b>82</b> Street Address (P.O. Box Number is Not Acceptable)
	<b>83</b>
	<b>84</b> City
	<b>FL</b> <b>85</b> Zip Code

**11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.**

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>LANDRY, WILLIAM D.</b>	1.2 NAME	<b>PRESIDENT</b>
STREET ADDRESS	<b>2700 S. ZUNI ST.</b>	1.3 STREET ADDRESS	<b>CHARLES R. SCHADER</b>
CITY-ST-ZIP	<b>ENGLEWOOD CO 80110</b>	1.4 CITY-ST-ZIP	<b>2775 S. VALLEJO STREET</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BROWN, GARY L.</b>	2.2 NAME	<b>GLEN BRONSTEIN</b>
STREET ADDRESS	<b>2700 S. ZUNI ST.</b>	2.3 STREET ADDRESS	<b>Assistant SECRETARY</b>
CITY-ST-ZIP	<b>ENGLEWOOD CO 80110</b>	2.4 CITY-ST-ZIP	<b>675 CENTRAL AVENUE</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>GLENN, GERALD M.</b>	3.2 NAME	<b>DAVID A. KUESTER</b>
STREET ADDRESS	<b>2700 S. ZUNI ST.</b>	3.3 STREET ADDRESS	<b>ASST. SECRETARY</b>
CITY-ST-ZIP	<b>ENGLEWOOD CO 80110</b>	3.4 CITY-ST-ZIP	<b>2775 S. VALLEJO STREET</b>
TITLE	<b>P/T</b> <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LANDRY, WILLIAM D.</b>	4.2 NAME	
STREET ADDRESS	<b>2700 S. ZUNI STREET</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ENGLEWOOD CO 80110</b>	4.4 CITY-ST-ZIP	
TITLE	<b>VP</b> <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BROWN, GARY L.</b>	5.2 NAME	
STREET ADDRESS	<b>2700 S. ZUNI STREET</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ENGLEWOOD CO 80110</b>	5.4 CITY-ST-ZIP	
TITLE	<b>A/S</b> <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ARNOLD, LORRAINE</b>	6.2 NAME	
STREET ADDRESS	<b>2700 S. ZUNI STREET</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ENGLEWOOD CO 80110</b>	6.4 CITY-ST-ZIP	

**14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.**

**SIGNATURE:** *Lorraine M. Arnold* **LORRAINE M. ARNOLD 4/25/97 (303) 761-6603**

CR2E034 (9/96)