

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M02000003082

FILED
Feb 09, 2003
Secretary of State

Entity Name: CLARION ASSOCIATES OF COLORADO, LLC

Current Principal Place of Business:

1700 BROADWAY, STE. 400
DENVER, CO 80290

New Principal Place of Business:

Current Mailing Address:

1700 BROADWAY, STE. 400
DENVER, CO 80290

New Mailing Address:

FEI Number: 84-1290530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT LEE ROWE III
9471 BAYMEADOWS RD., SUITE 203
JACKSONVILLE, FL 32256 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: DUERKSEN, CHRISTOPHER
Address: 1700 BROADWAY, STE. 400
City-St-Zip: DENVER, CO 80290

Title: MGR () Delete
Name: GOEBEL, R. MATTHEW
Address: 1700 BROADWAY, STE. 400
City-St-Zip: DENVER, CO 80290

Title: MGR () Delete
Name: ELLIOTT, DON
Address: 1700 BROADWAY, STE. 400
City-St-Zip: DENVER, CO 80290

Title: MGR () Delete
Name: RICHARDSON, CRAIG
Address: 4819 EMPEROR BLVD., 4TH FLOOR
City-St-Zip: DURHAM, NC 27703

Title: MGR () Delete
Name: HERMAN, BEN
Address: 114 E. OAK ST.
City-St-Zip: FORT COLLINS, CO 80524

Title: MGR (X) Delete
Name: BETHEL, LESLIE
Address: 1226 MEDICINE BOW
City-St-Zip: ASPEN, CO 81611

ADDITIONS/CHANGES:

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
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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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: R. MATTHEW GOEBEL

MGR

02/09/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date