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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P01499

CRSS CONSTRUCTORS, INC.

·	•							AN CKEN BIBLIKER)
Principal Place	of Business	Mailing Address		-			1911 B1911 B1811 B1	#11 #1#11 #1#11 1##1
1670 BROADWA STE - 900 DENVER CO 90	•	P O BOX 7084 PASADENA CA 91105 US				DO NOT WRITE IN THIS SPACE		
US						3. Date Incorporated or Qualifed 04/04/1984		
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				76-0083883		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Countr	y		8. This corporation owes the current year		_
24	25 29 30)		Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registe	red Agent	
AT 6	CONCONTRAL OVOTEL		81	l Nam	е			
	CORPORATION SYSTEM		82	Stree	et Addres	ss (P.O. Box Number is Not Acceptable)		
	S. PINE ISLAND ROAD							
PLAN	NTATION FL 33324		83	8				
	· ·		84	City			FL 85 Z	Zip Code
. office or p	to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligat	nt Florida. Such change was auth	norizea bi	∕une co	ed corpor rporation	ration submits this statement for the purpos 's board of directors. I hereby accept the a	se of changing appointment as	its registered registered
SIGNATURE								
<u>.</u>	Signature, typed or printed name of registered agent			int signatu	e required v	when reinstating) DAT ADDITIONS/CHANGES TO OFFICER		TORS IN 12
12.	OFFICERS AND	D DELETE	13. 1.1 TITLE		- 1	ADDITIONS/CHANGES TO OFFICER	☐ Chang	
TITLE	DP OCCUT	C) Deter						,.
NAME (0.17 a.m., 0.00		1.2 NAME					
STREET ADDRESS	1670 BROADWAY, STE. 3200		1.3 STREE		ss			
CITY-ST-ZIP	DENVER CO			ST-ZIP			☐ Chan	ge Addition
TITLE	T PROCES IN LIM	□ nere i.e.	2.1 TITLE				Onder:	gc
NAME	111000011,-0110		2.2 NAME		<u></u>			
STREET ADDRESS				T ADDRES	⁸⁸			
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	+		Chan	nge
TITLE	EV DOD		3.1 TITLE				+.id.i	J
NAME	CORNELL, ROD		3.2 NAME					
STREET ADDRESS	1300 N 17TH ST STE 600		3.3 STRE		33			
CITY-ST-ZIP	ARLINGTON VA 22209	TT DELETE	3.4 CiTY-	ST-ZIP			Chan	ge Addition
TITLE	D DEAN WARDEN	☐ <u>NÉTEIE</u>	4.1 TITLE					90
NAME	DEAN, WARREN		4. 2 NAME					
STREET ADDRESS			I .	ET ADDRES	SS			
CITY-ST-ZIP	HOUSTON TX	DELETE	4.4 CITY-				☐ Chan	ge Addition
TITLE	AT DATE OF THE PARTY OF THE PAR	☐ DELETE	5.1 TITLE 5.2 NAME					5
NAME	TARNOW, PATRICIA			ET ADDRES				
STREET ADDRESS	1670 BROADWAY, STE 3200				~			
CITY-ST-ZIP	DENVER CO	C) per cre	5.4 CITY- 6.1 TITLE		-		☐ Chan	ge Addition
TITLE	S	☐ DELETE	1				Cilan	3c 🗆 Voquion
NAME	MARKLEYIII, WILLIAM C		6.2 NAME					
L OTDEET ADDRESS	1111 S ARROYO PKWY		■ 6.3 STRE	ET ADDRES	55 I			

14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

John W. Prosser,

(626) 578-3500

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90190 013 ***150.00

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