

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB -9 AM 10: 25

DOCUMENT # P22189

(5)

1. Corporation Name

THERMAL-DYNAMIC TOWERS, INC.

Principal Place of Business

Mailing Address

12600 W COLFAX AVE -#C-500—
LAKEWOOD CO 80215-0734—

12600 W COLFAX AVE -#C-500—
LAKEWOOD CO 80215-0734—

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/20/1988

3a. Date of Last Report

03/01/1994

2. Principal Place of Business

2a. Mailing Address

21 143 Union Boulevard

26 143 Union Boulevard

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Ste. 400

27 Ste. 400

City & State

City & State

23 Lakewood, CO 80228

28 Lakewood, CO 80228

Zip

Country

Zip

Country

24 80228

25 Jefferson

29 80228

30 Jefferson

4. FEI Number

51-0268494

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	GLASSEN, THOMAS J.H.
STREET ADDRESS	12600 W. COLFAX AVE C-500
CITY - ST - ZIP	LAKEWOOD CO
TITLE	S
NAME	HORN, CHRISTIE
STREET ADDRESS	5355 MIRA SORRENTO PLACE
CITY - ST - ZIP	SAN DIEGO CA
TITLE	D
NAME	HOFFMEISTER, GERALD
STREET ADDRESS	5355 MIRA SORRENTO PL
CITY - ST - ZIP	SAN DIEGO CA
TITLE	D
NAME	KOCH, HERBERT
STREET ADDRESS	12600 W COLFAX AVE C500
CITY - ST - ZIP	LAKEWOOD CO
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11 TITLE	☒ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	2873 Cortina Lane
14 CITY - ST - ZIP	Evergreen, Colorado 80439
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☒ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	143 Union Boulevard, #400
44 CITY - ST - ZIP	Lakewood, Colorado 80228
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Thomas J. H. Glassen
SIGNATURE AND TYPED OR PRINTED NAME OF MONITOR OFFICER OR DIRECTOR

01-23-95

(303) 987-0123

(Date)

(Telephone Number)