

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P31403 (9)

1. Corporation Name

SCHNEIDER SECURITIES, INC.



Principal Place of Business

104 BROADWAY, 5TH FLOOR  
DENVER CO 80203

Mailing Address

104 BROADWAY, 5TH FLOOR  
DENVER CO 80203

3. Date Incorporated or Qualified  
10/17/1990

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

21 1120 Lincoln St. #900

Suite, Apt. #, etc.

22 City & State

23 Denver, CO

24 Zip 80203

Country USA

2a. Mailing Address

26 1120 Lincoln St #900

Suite, Apt. #, etc.

27 City & State

28 Denver, CO

29 Zip 80203

Country USA

4. FEI Number  
84-0982281

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE  
NAME O'ROURKE, THOMAS J.  
STREET ADDRESS 7193 SILVERHORN DRIVE  
CITY-ST-ZIP EVERGREEN CO

TITLE VD ☐ DELETE  
NAME MAY, ROGER P.  
STREET ADDRESS 2780 INDIANA  
CITY-ST-ZIP GOLDEN CO

TITLE STD ☐ DELETE  
NAME DURAY-BITO, SIEGFRIED P.  
STREET ADDRESS 5475 MANITOU ROAD  
CITY-ST-ZIP LITTLETON CO

TITLE CD ☐ DELETE  
NAME SCHNEIDER, THOMAS W.  
STREET ADDRESS 3328 SWADLOW  
CITY-ST-ZIP WHEATRIDGE CO

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS 15057 W. 32nd Place  
4.4 CITY-ST-ZIP Golden, CO 80401

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIEGFRIED P. DURAY-BITO

4/25/96

303-837-9200

Date

Daytime Phone #

CR2E034 (12/95)