

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 14 1997 8:00am
Secretary of State

DOCUMENT # P93000006443 (4)

1. Corporation Name
2235 ASSOCIATES, INC.



Principal Place of Business

1201 16TH ST.
#105
DENVER CO 80202

Mailing Address

% JOHN SABISTON
P.O. BOX 297
FT. MYERS FL 33902-0297

3. Date Incorporated or Qualified
01/22/1993

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip Country

24 25 26 27 28 29 30

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

4. FEI Number

65-0415078

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

COSTELLO, JAMES M
C/O AVERY, WHIGHAM & WINESETT, P.A
2248 FIRST ST
FORT MYERS FL 33901

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 D CALDIERO, DAVID DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
5880 S. GOLDSMITH PLACE
ENGLEWOOD CO 80111

TITLE D MARCUS, BRIAN DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
2 HITZ PLACE
HICKSVILLE NY 11801

TITLE D SABISTON, JOHN DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP
3480 HANCOCK BRIDGE PKWY.
FT. MYERS FL 33903

TITLE DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

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 P/D Change Addition

1.2 NAME CALDIERO, DAVID
1.3 STREET ADDRESS 2640 East 3rd Avenue
1.4 CITY- ST- ZIP Denver, CO 80206

2.1 TITLE T/D Change Addition

2.2 NAME MARCUS, BRIAN

2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE V/S/D Change Addition

3.2 NAME SABISTON, JOHN
3.3 STREET ADDRESS 3480 Hancock Bridge Pkwy
3.4 CITY- ST- ZIP North Fort Myers, FL 33903

4.1 TITLE Change Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

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 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:

JOHN SABISTON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1/12/97 941-997-4536
Date Daytime Phone #

CR2E034 (9/96)

5/12/97

05 4
5/10/97

DK dep 165.00