

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P31403

1. Entity Name

SCHNEIDER SECURITIES, INC.

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90133 015 ***150.00

Principal Place of Business

1120 LINCOLN ST
STE 900
DENVER CO 80203
US

Mailing Address

1120 LINCOLN ST
STE 900
DENVER CO 80203
US

00040037



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **84-0982281**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME O'ROURKE, THOMAS J.
STREET ADDRESS 4505 S YOSEMITE, #138
CITY-ST-ZIP DENVER CO

TITLE TD ☐ Delete
NAME DURAY-BITO, SIEGFRIED P.
STREET ADDRESS 5000 ASPEN DRIVE
CITY-ST-ZIP LITTLETON CO

TITLE CD ☐ Delete
NAME SCHNEIDER, THOMAS W.
STREET ADDRESS 15057 W 32ND PL
CITY-ST-ZIP GOLDEN CO

TITLE SD ☐ Delete
NAME MURRAY, JAY A
STREET ADDRESS 5001 E FREMONT AVE
CITY-ST-ZIP LITTLETON CO

TITLE D ☐ Delete
NAME ROUSE, RICK J
STREET ADDRESS 3632 W. SERAMONTE DR
CITY-ST-ZIP HIGHLANDS RANCH CO 30126

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Terry Nickels - Controller 18/APR/01 303-837 9200