

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001
www.flsos.state.fl.us

DOCUMENT # 245146 (6)

1. Corporation Name

CARRIAGE HOUSE MOTOR LODGE, INC.

APPROVED
AND
FILED

95 MAY -1 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

9110 E. NICHOLS AVENUE
SUITE 200
ENGLEWOOD CO 80112
US

Mail Stop Address

C/O UNITED ARTISTS THEATRE CIRCUIT INC.
9110 E. NICHOLS AVE., SUITE 200
ENGLEWOOD CO 80112
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 03/01/1961	3a. Date of Last Report 05/01/1994
4. FIC Number 59-0938784	Applied For ☐ Not Applicable
5. Certificate of Status Deemed ☐	\$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 § 190.01(1)(a) Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, City, P.O. Box	26. State, City, P.O. Box
22. City, State	27. City, State
23. City, State	28. City, State
24. City, State	29. City, State
25. City, State	30. City, State

9. Name and Address of Current Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3)(b), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, and both in the State of Florida. This 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 Sections 607.01(2) Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Signature of New Registered Agent or Director

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995																																																												
<table border="1"> <tr> <td>OFFICER</td> <td>NAME</td> <td>STREET ADDRESS</td> <td>CITY, STATE, ZIP</td> </tr> <tr> <td>CD</td> <td>BLAIR, STEWART</td> <td>9110 E. NICHOLS AVE.</td> <td>ENGLEWOOD CO</td> </tr> <tr> <td>VS</td> <td>HARDY, RALPH E.</td> <td>9110 E. NICHOLS AVE.</td> <td>ENGLEWOOD CO</td> </tr> <tr> <td>PD</td> <td>WARZEL, PETER</td> <td>9110 E. NICHOLS AVE.</td> <td>ENGLEWOOD CO</td> </tr> <tr> <td>V</td> <td>CLEVELAND, HAL</td> <td>9110 E. NICHOLS AVE.</td> <td>ENGLEWOOD CO</td> </tr> <tr> <td>TVD</td> <td>HALL, KURT C</td> <td>9110 E. NICHOLS AVE.</td> <td>ENGLEWOOD CO</td> </tr> <tr> <td>V</td> <td>KOETS, STEVEN J.</td> <td>9110 E. NICHOLS AVE.</td> <td>ENGLEWOOD CO</td> </tr> </table>	OFFICER	NAME	STREET ADDRESS	CITY, STATE, ZIP	CD	BLAIR, STEWART	9110 E. NICHOLS AVE.	ENGLEWOOD CO	VS	HARDY, RALPH E.	9110 E. NICHOLS AVE.	ENGLEWOOD CO	PD	WARZEL, PETER	9110 E. NICHOLS AVE.	ENGLEWOOD CO	V	CLEVELAND, HAL	9110 E. NICHOLS AVE.	ENGLEWOOD CO	TVD	HALL, KURT C	9110 E. NICHOLS AVE.	ENGLEWOOD CO	V	KOETS, STEVEN J.	9110 E. NICHOLS AVE.	ENGLEWOOD CO	<table border="1"> <tr> <td>1. NAME</td> <td>2. NAME</td> <td>3. NAME</td> <td>4. NAME</td> </tr> <tr> <td>5. NAME</td> <td>6. NAME</td> <td>7. NAME</td> <td>8. NAME</td> </tr> <tr> <td>9. NAME</td> <td>10. NAME</td> <td>11. NAME</td> <td>12. NAME</td> </tr> <tr> <td>13. NAME</td> <td>14. NAME</td> <td>15. NAME</td> <td>16. NAME</td> </tr> <tr> <td>17. NAME</td> <td>18. NAME</td> <td>19. NAME</td> <td>20. NAME</td> </tr> <tr> <td>21. NAME</td> <td>22. NAME</td> <td>23. NAME</td> <td>24. NAME</td> </tr> <tr> <td>25. NAME</td> <td>26. NAME</td> <td>27. NAME</td> <td>28. NAME</td> </tr> <tr> <td>29. NAME</td> <td>30. NAME</td> <td>31. NAME</td> <td>32. NAME</td> </tr> </table>	1. NAME	2. NAME	3. NAME	4. NAME	5. NAME	6. NAME	7. NAME	8. NAME	9. NAME	10. NAME	11. NAME	12. NAME	13. NAME	14. NAME	15. NAME	16. NAME	17. NAME	18. NAME	19. NAME	20. NAME	21. NAME	22. NAME	23. NAME	24. NAME	25. NAME	26. NAME	27. NAME	28. NAME	29. NAME	30. NAME	31. NAME	32. NAME
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.01(1)(a) Florida Statutes. I further certify that the information included in this annual report or supplemental statement requested 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 secretary or transfer agent named to compile this report as required by a Chapter 190 Florida Statutes, and that my name appears on Block 12 of this report or supplemental statement with an address.

SIGNATURE:

STEVEN J. KOETS
DIRECTOR AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95

303/792-3600
Tallahassee, Florida