2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 840733 1. Entity Name NHP MANAGEMENT COMPANY						May 03, 2001 8:00 am Secretary of State 05-03-2001 91136 012 ***150.00			
Principal Place of Business 2000 S COLORADO BLVD IWR TWO STE 2-1000 DENVER CO 80222 US			Mailing Address 2000 S COLORADO BLVD TWR TWO STE 2-1000 DENVER CO 80222 US				· • • • • • • • • • • • • • • • • • • •	28 41 010 11 0 20	(1) 618 41 (86 1
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State			City & State		4. 1	FEI Number 52-1121524 Applied For Not Applied For			
Zip		Country	Zip	Country	5. (Certificate of Status Desired		8.75 Add	ditional
1201 STE				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)					
8. The above	e named entity Signature, typed		T	City agistered office of Agent signates FEE IS \$150.	ure required when re	instating)	DATE	Zip Cod	
Tax filing requirement and elects to do so. (See criteria on back)			After MAY 1, 2001 Fee will Make Check Payable to Depar		550.00 t of State	10. Election Campaign Fir Trust Fund Contribution	on.	Added	May Be
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED FOYE, PAT 2000 S CO DENVER C	OLO BLVD TWR TWO #2	☐ Delete	112. TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD	DITIONS/CHANGES TO OFF		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BONDER, JOEL F 2000 S COLO BLVD TWR TWO #2-1000							Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		N TOOMEY DLO BLVD TWR TWO #2: O 80222	XXXPelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ronald 2000 S.	resident			
NAME STREET ADDRESS CITY-ST-ZIP	EV HARRY G 2000 S CO DENVER C	LO BLVD TWR TWO #2-	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		_		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT HEATH, PA 2000 S CO DENVER C	LO BLVD TWR TWO #2-	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPT		6	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	☐ Addition

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 TYPE AND TYPE

Patricia Heath Senior VP/Treas

(303) 757-8101

4-26-01

Daytime Phone #