

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F01000004480**

1. Entity Name

**ONE BENEFITS, INC.**

Principal Place of Business

**8505 EAST ORCHARD ROAD  
GREENWOOD VILLAGE CO 80111**

Mailing Address

**8505 EAST ORCHARD ROAD  
GREENWOOD VILLAGE CO 80111**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**84-0985843**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PCD	<input checked="" type="checkbox"/> Delete
NAME	MOTZ, JAMES D	
STREET ADDRESS	8505 EAST ORCHARD ROAD	
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80111	
TITLE	VD	<input type="checkbox"/> Delete
NAME	GOLDIN, DONNA ANNE	
STREET ADDRESS	8505 EAST ORCHARD ROAD	
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80111	
TITLE	S	<input type="checkbox"/> Delete
NAME	SCHULTZ, RICHARD G	
STREET ADDRESS	8505 EAST ORCHARD ROAD	
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80111	
TITLE	T	<input type="checkbox"/> Delete
NAME	DERBACK, GLEN RAY	
STREET ADDRESS	8505 EAST ORCHARD ROAD	
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80111	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROSENBAUM, MARTIN	
STREET ADDRESS	8505 EAST ORCHARD ROAD	
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80111	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Riggall, Fred C.	
STREET ADDRESS	8505 East Orchard Road	
CITY-ST-ZIP	Greenwood Village, CO 80111	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Richard G. Schultz*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard G. Schultz

3/18/02

Date

(303)737-4649

Daytime Phone #

**FILED**  
**Apr 01, 2002 8:00 am**  
**Secretary of State**

04-01-2002 90612 013 \*\*\*150.00

**80055088**



DO NOT WRITE IN THIS SPACE

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CP2E034 (9/01)