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FILED

Apr 29 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F92000000719 (6)

1. Corporation Name

BC REAL ESTATE INVESTMENTS, INC.

Principal Place of Business

14103 DENVER WEST PKWY  
GOLDEN CO 80401  
US

Mailing Address

14103 DENVER WEST PKWY  
GOLDEN CO 80401-3116  
US



3. Date Incorporated or Qualified  
12/16/1992

3a. Date of Last Report  
04/29/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

36-3868330

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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	PD	<input checked="" type="checkbox"/> DELETE
NAME	NADHIR, SAAD J	
STREET ADDRESS	1973 KEATS COURT	
CITY-ST-ZIP	HIGHLAND PARK IL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BECK, SCOTT A	
STREET ADDRESS	809 11TH STREET	
CITY-ST-ZIP	BOULDER CO	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SHEARER, JEFFRY	
STREET ADDRESS	123 RAVINE	
CITY-ST-ZIP	HINSDALE IL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	LINK, MARK	
STREET ADDRESS	16130 E. DORADO CIRCLE	
CITY-ST-ZIP	AURORA CO	
TITLE	VS	<input checked="" type="checkbox"/> DELETE
NAME	BINGLE, DONALD J	
STREET ADDRESS	21982 PARADISE CIRCLE	
CITY-ST-ZIP	GOLDEN CO	
TITLE	T	<input type="checkbox"/> DELETE
NAME	FULLINWIDER, STUART N	
STREET ADDRESS	24768 FOOTHILL DRIVE N.	
CITY-ST-ZIP	GOLDEN CO	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Joren Peterson	
1.3 STREET ADDRESS	14103 Denver West Pkwy.	
1.4 CITY-ST-ZIP	Golden, CO 80401	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Jim Hoar	
3.3 STREET ADDRESS	14103 Denver West Pkwy.	
3.4 CITY-ST-ZIP	Golden, CO 80401	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	J. Randal Miller	
5.3 STREET ADDRESS	14103 Denver West Pkwy.	
5.4 CITY-ST-ZIP	Golden, CO 80401	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0496784

CR2E034 (9/96)