

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
 05-27-2002 90280 005 ***150.00

0613000 AT

DOCUMENT # F93000001993

1. Entity Name
FISCHER IMAGING CORPORATION

Principal Place of Business
12300 NORTH GRANT STREET
THORNTON CO 80241
US

Mailing Address
12300 NORTH GRANT STREET
THORNTON CO 80241
US

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
36-2756787

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH 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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD NIELDS, MORGAN W 12300 N GRANT STREET THORNTON CO 80241 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAUL, KATHRYN A 12300 N GRANT STREET THORNTON CO 80241 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURBANK, FRED 12300 N GRANT STREET THORNTON CO 80241 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THERESA AYERS 12300 N GRANT STREET THORNTON, CO 80241 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RIVELLI, LOUIS E 12300 N GRANT STREET THORNTON CO 80241 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GERALD KNUDSON 12300 N. GRANT STREET THORNTON, CO 80241 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST JOHNSON, RODNEY B 12300 N GRANT STREET THORNTON CO 80241 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAGG, DAVID G 12300 N GRANT STREET THORNTON CO 80241 ☐ 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RODNEY B. JOHNSON

Date

Daytime Phone #

4/30/02 303/452-6800

CR2E034 (9/01)