CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1998 DOCUMENT # F9400000740 (0) NASSAU COMMUNICATIONS, INCORPORATED

Principal Place of Business 13131 W CEDAR AVE

350 INDIANA ST., STE 600

**FILED** Feb 02 1998 8:00am Secretary of State



US US				GOLDEN CO 30401				DO NOT WRITE IN THIS SPACE				
		A.		_ Some				3. Date Incorporated or Qui 02/15/1994	lified			
2.	2. Principal Place of Business			. Mailing Address				4. FEI Number			Applied For	
21	1]			26 13131 W. Cedar Dr.				84-1215596			Not Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desir	ed. 🕱		.75 Additional ee Required	
23	City & State			City & State 28 Lakewood, CO				6. Election Campaigh Finan Trust Fund Contribution	cing		5.00 May Be dded to Fees	
	Zip	Country		Zip		Country		8. This corporation dwes or	has paid the	current ye	ear Intangible	
24		25	29	80228	30	US		Personal Property Tax du	e June 30.	☐ Yes	☐ No	
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
C T CORPORATION SYSTEM					-	81	Name			_		
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324							Street Add	et Address (P.O. Box Number is Not Acceptable)				
						83						
			_			84	City		F	L 85	Zip Code	
11.								poration submits this statement for				

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 DIREC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE	PCT	DELETE	1.1 TITLE		Change	Addition					
NAME	NASSAU, BRUCE A		1.2 NAME								
STREET ADDRESS	14657 W. CEDAR AVE.		1.3 STREET ADDRESS								
CITY-ST-ZIP	GOLDEN CO		1.4 CITY-ST-ZIP								
TITLE	DV	DELETE	2.1 TITLE		Change	Addition					
NAME	NASSAU, LURIE		22 NAME		_	Į					
STREET ADDRESS	14657 W. CEDAR AVE.		2.3 STREET ADDRESS								
CITY-ST-ZIP	GOLDEN CO		2. 4 CITY - ST - ZIP								
TITLE	D	DELETE	3.1 TITLE		Change	Addition					
NAME	NASSAU, LARRY		3.2 NAME			1					
STREET ADDRESS	2941 MACHEATH CRESCENT		3.3 STREET ADDRESS			i					
CITY-ST-ZIP	FLOSSMOOR IL		3.4. CITY-ST-ZIP								
TITLE	S	☐ DELETE	4.1 TITLE	- <del>10 -</del>	Change	Addition					
NAME	HAMILTON, DAVID		4, 2 NAME								
STREET ADDRESS	8117 W. FROST PL.		4.3 STREET ADDRESS			l					
CITY-ST-ZIP	LITTLETON CO		4.4 CITY - ST - ZIP								
TITLE		☐ DELETE	5.1 TITLE		Change	Addition					
NAME			5.2 NAME	:							
STREET ADDRESS			5.3 STREET ADDRESS	ļ		ļ					
CITY-ST-ZIP			5.4 CITY - ST - ZIP								
TITLE		☐ DELETE	6.1 TITLE		L Change	Addition					
NAME			6.2 NAME			1					
STREET ADDRESS			6.3 STREET ADDRESS								
0.774 67 710			C 4 0777/ OT 710			Į.					

14. I hereby certify that the information supplied with this filling 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; 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 12 or Block 13 if changed, or on an attachment with an adolpses.

SIGNATURE:

1-20-98 303-987-3300