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FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **F94000003188 (9)**

1. Corporation Name
LIBERTY LAKE, INC.

Principal Place of Business

**5619 DTC PARKWAY
8101 EAST PRENTICE
ENGLEWOOD CO 80111
US**

Mailing Address

**P.O. BOX 5630
TAX DEPT
ENGLEWOOD CO 80217-5630
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/17/1994

4. FEI Number

83-0300985

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
TALLAHASSEE FL 32301**

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** ☒ DELETE

NAME **CLOUSTON, BRENDAN R**
STREET ADDRESS **5619 DTC PARKWAY**
CITY-ST-ZIP **ENGLEWOOD CO**

TITLE **SECD** ☐ DELETE

NAME **BRETT, STEPHEN M**
STREET ADDRESS **5619 DTC PARKWAY**
CITY-ST-ZIP **ENGLEWOOD CO**

TITLE **TRSD** ☐ DELETE

NAME **SCHOTTERS, BERNARD**
STREET ADDRESS **5619 DTC PARKWAY**
CITY-ST-ZIP **ENGLEWOOD CO**

TITLE **V** ☐ DELETE

NAME **BLAYLOCK, GARY**
STREET ADDRESS **5619 DTC PARKWAY**
CITY-ST-ZIP **ENGLEWOOD CO**

TITLE **V** ☐ DELETE

NAME **GOOKIN, NOLAN**
STREET ADDRESS **5619 DTC PARKWAY**
CITY-ST-ZIP **ENGLEWOOD CO**

TITLE **VP** ☐ DELETE

NAME **BRACKEN, GARY K**
STREET ADDRESS **5619 DTC PARKWAY**
CITY-ST-ZIP **ENGLEWOOD FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P/D** ☐ Change ☒ Addition

1.2 NAME **HINDERY, LEO J., JR.**
1.3 STREET ADDRESS **5619 DTC PARKWAY**
1.4 CITY-ST-ZIP **ENGLEWOOD, CO 80111**

2.1 TITLE **V/S/D** ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE **V/T** ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE **AV** ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE **AV** ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 address.

SIGNATURE:

GARY BLAYLOCK

4/22/98

303-267-5500

CR2E034 (10/97)