

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F94000003875 (1)**

1. Corporation Name

SAGE CORPORATE GENERAL PARTNER, INC.



Principal Place of Business

Mailing Address

**SUITE 800
1512 LARIMER
DENVER CO 80202**

**SUITE 800
1512 LARIMER
DENVER CO 80202**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/25/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 84-1273344	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AS	1.1 TITLE	AS
NAME	GREEN, CAROL A	1.2 NAME	Harris White
STREET ADDRESS	1512 LARIMER, SUITE 800	1.3 STREET ADDRESS	1512 Larimer, Suite 800
CITY-ST-ZIP	DENVER CO 80202	1.4 CITY-ST-ZIP	Denver CO 80202
TITLE	PD	2.1 TITLE	
NAME	NEUMEYER, ZACHARY T	2.2 NAME	
STREET ADDRESS	1512 LARIMER, SUITE 800	2.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER CO 80202	2.4 CITY-ST-ZIP	
TITLE	VSTD	3.1 TITLE	
NAME	ISENBERG, WALTER L	3.2 NAME	
STREET ADDRESS	1512 LARIMER, SUITE 800	3.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER CO 80202	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	
NAME	GEIST, KENNETH	4.2 NAME	
STREET ADDRESS	1512 LARIMER SUITE 800	4.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER CO	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

C. Harris White

C. HARRIS WHITE

1-23-98

303-595-7300

CF2E034 (10/97)