

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 19, 2000 8:00 am**  
**Secretary of State**

04-19-2000 90034 002 \*\*\*150.00

**DOCUMENT # F95000003110**

1. Entity Name

**IH (DELAWARE), INC.**

Principal Place of Business

Mailing Address

**1873 S. BELLAIRE ST., SUITE 1700  
 DENVER CO 80222  
 US**

**1873 S. BELLAIRE ST., SUITE 1700  
 DENVER CO 80222-4360  
 US**

0 0 0 0 0 0



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**2000 S. Colorado Boulevard**

3. Mailing Address

**2000 S. Colorado Boulevard**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Tower Two, Suite 2-1000**

**Tower Two, Suite 2-1000**

City & State

City & State

**Denver, CO**

**Denver, CO**

4. FEI Number

**57-0995946**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

Zip

Country

Zip

Country

**80222**

**USA**

**80222**

**USA**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301**

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, 2000 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **CD** ☐ Delete  
 NAME **CONSIDINE, TERRY**  
 STREET ADDRESS **1873 S. BELLAIRE ST., SUITE 1700**  
 CITY-ST-ZIP **DENVER CO 80222**

TITLE **PD** ☐ Delete  
 NAME **KOMPANIEZ, PETER**  
 STREET ADDRESS **1873 S. BELLAIRE ST., SUITE 1700**  
 CITY-ST-ZIP **DENVER CO 80222**

TITLE **VS** ☐ Delete  
 NAME **BONDER, JOEL**  
 STREET ADDRESS **1873 S. BELLAIRE ST., SUITE 1700**  
 CITY-ST-ZIP **DENVER CO 80222**

TITLE **VT** ☐ Delete  
 NAME **HEATH, PATRICIA**  
 STREET ADDRESS **1873 S. BELLAIRE ST., SUITE 1700**  
 CITY-ST-ZIP **DENVER CO 80222**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **2000 S. Colo. Blvd., Tower Two, #2-1000**  
 CITY-ST-ZIP **Denver, CO 80222**

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **2000 S. Colo. Blvd., Tower Two, #2-1000**  
 CITY-ST-ZIP **Denver, CO 80222**

TITLE ☒ Change ☐ Addition  
 NAME  
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 CITY-ST-ZIP **Denver, CO 80222**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: By Joel Bonder Joel Bonder, Secretary**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**(303) 757-8101**

Daytime Phone #

CR2E034 (9/99)