

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000005713

1. Entity Name

AMERICANA DINING CORP.

**FILED**  
**Jul 12, 2000 8:00 am**  
**Secretary of State**

07-12-2000 90006 042 \*\*\*550.00

Principal Place of Business

Mailing Address

1 CORPORATE PLACE

55 FERNCROFT RD.

DANER MA 01923

1 CORPORATE PLACE

55 FERNCROFT RD.

DANER MA 01923-4001

2. Principal Place of Business

5619 DTC PARKWAY

3. Mailing Address

5619 DTC PARKWAY

Suite, Apt. #, etc.

SUITE 1000

Suite, Apt. #, etc.

SUITE 1000

City & State

ENGLEWOOD CO

City & State

ENGLEWOOD CO.

Zip

80111-3075

Country

USA

Zip

80111-3075

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

04-3222676

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VT ☒ Delete  
NAME MOORE, DONALD  
STREET ADDRESS ONE CORPORATE PLACE, 55 FERNCROFT RD.  
CITY-ST-ZIP DANVERS MA

TITLE P/D/CEO ☐ Change ☒ Addition  
NAME WILLIAM BAUMHAUER  
STREET ADDRESS 790 INT'L ISLE DRIVE  
CITY-ST-ZIP CASTLE ROCK, CO. 80104

TITLE AS ☐ Delete  
NAME DEPOIAN, DONNA  
STREET ADDRESS 55 FERNCROFT RD  
CITY-ST-ZIP DANVERS MA 01923

TITLE S ☒ Change ☐ Addition  
NAME DONNA DEPOIAN  
STREET ADDRESS 614 FOREST ST  
CITY-ST-ZIP NO. ANDOVER, MA 01845

TITLE P ☒ Delete  
NAME MOYLAN, K.C.  
STREET ADDRESS ONE CORPORATE PLACE, 55 FERNCROFT RD.  
CITY-ST-ZIP DANVERS MA

TITLE VP/T/CFO ☐ Change ☒ Addition  
NAME FRED DREIBHOLZ  
STREET ADDRESS 460 SO. MARION PARKWAY  
CITY-ST-ZIP DENVER, CO. 80209

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRED DREIBHOLZ

6/19/00

Date

(303) 804-1333

Daytime Phone #

CR2E(04/99)