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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600002709 (1)

SHOPPES THREE CORP.

Principal Place of Business Mailing Address				······		## (()		
	ELLEVIEW AVENUE. SUITE 350 VILLAGE CO 80111	7000 EAST BELLEVIEW AT GREENWOOD VILLAGE CO	VENUE, SUIT D 80111-1628	E 350				
					3. Date Incorporated or Qualified 05/30/1996	3a. Date of Last R	eport	
2. Principal P	2a. Mailing Address	g Address		4, FEI Number		pplied For		
21 26		[26]	·6]		APPLIED FOR 84-1344762 Not Applicable			
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 / Fee Re			
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be				
23		28		Trust Fund Contribution Added to Fees				
Zip 24	Country 25	Zip <b>29</b>	Countr 30	у	8. This corporation has liability for intangible tax under s. 199.032, florida Statutes Yes 🙀 No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
CT	CORPORATION SYSTEM		81	Name				
1200 SOUTH PINE ISLAND ROAD				Street Add	odress (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324				or our noticed (i.e. tox notified is not receptable)				
			63		744 (4.1.14)			
			84	Cilv		B5 Zip (	On all o	
							i	
11. Pursuant office or r agent I a	to the provisions of Sections 607.0502 registered agent, or both, in the State im familiar with, and accept the obliga	P and 607,1508, Florida Statut of Florida. Such change was itions of, Section 607,0505, Fl	es, the abov authorized b orida Statuto	e-named corp y the corporat s.	poration submits this statement for the pricion's beard of directors. I hereby acception	urpose of changing it the appointment as	s registered registered	
SIGNATURE								
	Signature, typed or printed name of registered ager			ent signature requi	red when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS  P DUE		13.					
NAME	•		1.1 TILLE			Addition		
STREET ADDRESS	PARISER, PAUL E 700 EAST BELLEVIEW AVENUE, SUITE 350		1.2 NAME					
CITY-ST-ZIP GREENWOOD VILLAGE CO 80111				1.3 STREET ADDRESS 1.4 CHY-S1-ZIP				
TITLE	V DLLEIE		2.1 TITLE	51- ZIP	Change Addition		Addition	
NAME	DATIONAL MAISO M		2.2 NAME			□ cualiĝe	L' LIOURON ("T	
STREET ADDRESS	700 EAST BELLEVIEW AVENUE, SUITE 350			I ADDRESS				
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80		2.4 CITY-					
TITLE	S	DELEJE	3.11111.5	91-41F		Change	Addition	
NAME	SELL, MARK A		3.2 NAME			□ cuange		
STREET ADDRESS				I ADDRESS				
CITY-ST-ZIP	A SECOND PROPERTY AND A SECOND		3.4. CITY-	- 1				
TITLE	1	DETERE	4.1 TITLE	V1 211		Change	Addition	
NAME	GARGARO, TRACY J		4. 2 NAME					

6.4 CITY- \$1-7IP 14. I do 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 eath; that I am an officer or director of the comparation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY - \$1 - ZIP

4.4 CITY - \$1 - 7(P)

5.1 TITLE

6.11(1)(6

6.2 NAME

DELFTE

DELETE

700 EAST BELLEVIEW AVENUE, SUITE 350

700 EAST BELLEVIEW AVENUE, SUITE 350

**GREENWOOD VILLAGE CO 80111** 

**GREENWOOD VILLAGE CO 80111** 

BELZBERG, SAMUEL

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

James M. Ratkovic 5/1/97

Change

Change

Addition

Addition

**FILED** 

May 13 1997 8:00am

Secretary of State

(303) 771-3533