

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F96000003238**

1. Entity Name

AIMCO/OTC QRS, INC.**FILED**
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91136 016 ***150.00

Principal Place of Business
2000 SOUTH COLORADO BLVD.
DENVER CO 80222Mailing Address
2000 SOUTH COLORADO BLVD.
DENVER CO 80222

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2000 S. Colo. Blvd.

Suite, Apt. #, etc.

Tower Two, #2-1000

City & State

Denver, CO

Zip

80222

Country

USA

3. Mailing Address

2000 S. Colo. Blvd.

Suite, Apt. #, etc.

Tower Two #2-1000

City & State

Denver, CO

Zip

80222

Country

USA4. FEI Number **84-1353133**

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL**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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PD		<input type="checkbox"/> Delete				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	KOMPANIEZ, PETER K	1873 S BELLAIRE ST., STE. 1700	DENVER CO 80222			2000 S. Colo. Blvd., Tower Two #2-1000	Denver, CO 80222
	EVPC		<input type="checkbox"/> Delete				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	BONDER, JOEL F	1873 S BELLAIRE ST., STE. 1700	DENVER CO 80222			2000 S. Colo Blvd., Tower Two #2-1000	Denver, CO 80222
	EVP		<input type="checkbox"/> Delete				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	FOYE, PATRICK J	1873 SOUTH BELLAIRE ST., 17TH FLOOR	DENVER CO 80222			2000 S. Colo. Blvd., Tower Two #2-1000	Denver, CO 80222
	DC		<input type="checkbox"/> Delete				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	CONSIDINE, TERRY	1873 SOUTH BELLAIRE ST., 17TH FLOOR	DENVER CO 80222			2000 S. Colo. Blvd., Tower Two #2-1000	Denver, CO 80222
			<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
					SVPT		
					Patricia K. Heath		
					2000 S. Colorado Blvd. Tower Two #2-1000		
					Denver, CO 80222		
			<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

Patricia Heath Senior VP/Treas 4-26-01 (303) 757-8101

Date

Daytime Phone #

CR2E034 (10/00)