SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600003676 (1)

CROSSLANDS CONSTRUCTION SOUTH, INC. Principal Place of Business Mailing Address 4800 S. ULSTER \$T. 4600 S. ULSTER ST. **SUITE 1180 SUITE 1180** DENVER CO 80237 DO NOT WRITE IN THIS SPACE DENVER CO 80237 3. Date Incorporated or Qualified 3a. Date of Last Report 07/22/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 58-2182701 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HYDE, ROBERT T ESQUIRE 1301 RIVERPLACE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1500** 83 JACKSONVILLE FL 32207 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fforida 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 Fforida. 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, Fforida Statutes. Signature, typed or printed name of registered agent and little if applicable (NOTE_Flegislared Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE **DURBOW, JEFF** DURBON, JEFF NAME 1.2 NAME 9674 LAS COLINAS DR STREET ADDRESS 1.3 STREET ADDRESS LITTLETON CO 80124 1.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE 2.1 TITLE Addition TITLE **BONDS, KEITH** 2.2 NAME NAME 615 WILL ROAD 1833 HALL STEAD BLVD 2.3 STREET ADDRESS STREET ADDRESS 35616 TALLAHASSEE FL 32308 cherolee, al 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Acdition 3.1 TITLE TITLE **GROVE, STEVE** NAME 32 NAME 1 OLD VIRGINIA CHASE STREET ADDRESS 3.3 STREET ADDRESS ATLANTA GA 30339 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE GALLOWAY, DAVE NAME 4. 2 NAME STREET ADDRESS 6122 S GALENCA ST 4.3 STREET ADDRESS ENGLEWOOD CO 80111 CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition TITLE DELETE 5.1 TITLE Change Dan Strid 1208 Cascade Ct. NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS Fort Collins CO 80521 CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE

14. To 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 corporation or the receiver or trusted 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, by on an altachment with an address.

6.4 CHTY-ST-ZIP

6.3 STREET ADDRESS

62 NAME

SIGNATURE:

NAME Street address

CITY-ST-ZIP

Nedd Aldinten 11 Gill

8-2797 (303)771-2108

FILED

Sep 12 1997 8:00am

Secretary of State