

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F99 00000 1712**

1. Entity Name

ICG Equipment, Inc.

FILED

00 APR 27 AM 10:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

161 Inverness Drive West  
Englewood, CO 80112

Mailing Address

161 Inverness Drive West  
Englewood, CO 80112  
Attn: Legal Department

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

84-1448149

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CT Corporation System  
c/o CT Corporation System  
1200 South Pine Island Road  
Plantation FL 33324

7. Name and Address of New Registered Agent

Name  
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)  
1201 Hays Street

City Tallahassee

FL

Zip Code 32301

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

*Carol K. Dolor*

Carol K. Dolor, Asst. VP

4/26/2000

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 NAME STREET ADDRESS CITY - ST - ZIP	President William S. Beans, Jr. 161 Inverness Dr. W Englewood, CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Exec. VP and Director Harry R. Herbst 161 Inverness Drive West Englewood, CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP, Gen. Counsel, Sec & Dir H. Don Teague 161 Inverness Drive West Englewood, CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Executive Vice President James R. Washington 161 Inverness Drive West Englewood, CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Regina A. Vegliante 161 Inverness Drive West Englewood, CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP, Controller & Director John V. Colgan 161 Inverness Drive West Englewood, CO 80112	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Additio
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Additio

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:

*John V. Colgan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/2000

Date

303-414-5000

Daytime Phone

CR2E034 (9/99)

000003227250--2



ACCOUNT NO. : 072100000032

REFERENCE : 664658 7189839

AUTHORIZATION : *Patricia Pigante*

COST LIMIT : \$ 150.00

ORDER DATE : April 17, 2000

ORDER TIME : 1:0 PM

ORDER NO. : 664658-380

CUSTOMER NO: 7189839

CUSTOMER: Ms. Katy Ryan  
Icg Communications, Inc.  
161 Inverness Drive West

Englewood, CO 80112

CHANGE OF AGENT

NAME: ICG EQUIPMENT, INC.

RECEIVED  
00 APR 27 PM 2:26  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom