

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000005904

1. Entity Name
CHARLES E. SMITH REALTY COMPANY



Principal Place of Business
9200 E PANORAMA CIRCLE
SUITE 400
ENGLEWOOD CO 80112

Mailing Address
9200 E PANORAMA CIRCLE
SUITE 400
ENGLEWOOD CO 80112

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 54-1713547

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME SMITH, ROBERT H
STREET ADDRESS 2345 CRYSTAL DRIVE
CITY-ST-ZIP ARLINGTON VA 22202

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

TITLE D ☐ Delete
NAME KOGOD, ROBERT P
STREET ADDRESS 2345 CRYSTAL DRIVE
CITY-ST-ZIP ARLINGTON VA 22202

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

TITLE CCEO ☐ Delete
NAME SELLERS, R SCOT
STREET ADDRESS 9200 E PANORAMA CIRCLE STE 400
CITY-ST-ZIP ENGLEWOOD CO 80112

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

TITLE EVCF ☐ Delete
NAME MUELLER, CHARLES E JR
STREET ADDRESS 9200 E PANORAMA CIRCLE STE 400
CITY-ST-ZIP ENGLEWOOD CO 80112

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

TITLE V ☐ Delete
NAME FLORY, DAVID
STREET ADDRESS 9200 E PANORAMA CIRCLE STE 400
CITY-ST-ZIP ENGLEWOOD CO 80112

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

TITLE EVP ☒ Delete
NAME MINAMI, W D CFO
STREET ADDRESS 2345 CRYSTAL DRIVE
CITY-ST-ZIP ARLINGTON VA 22202

TITLE ☐ Change ☒ Addition
NAME Caroline Brower
STREET ADDRESS 9200 E. Panorama Circle, Suite 400
CITY-ST-ZIP Englewood, CO 80112

12. 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 10 or Block 11 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

David Flory

1/27/03

303-708-5959

Date

Daytime Phone #

CR2E034 (10/02)