

2000 UNIFORM BUSINESS REPORT (UBR)

3/2

DOCUMENT # F99000006380

1. Entity Name

AMERITON FLORIDA HOLDINGS (1) INCORPORATED

FILED
May 15, 2000 8:00 am
Secretary of State

03-28-2000 90100 011 ***150.00

Principal Place of Business

7630 SOUTH CHESTER
ENGLEWOOD CO 80112

Mailing Address

7630 SOUTH CHESTER
ENGLEWOOD CO 80112

2. Principal Place of Business

7630 SOUTH CHESTER ST.

3. Mailing Address

7630 SOUTH CHESTER ST.

Suite, Apt. #, etc.

SUITE 190

Suite, Apt. #, etc.

SUITE 190

City & State

ENGLEWOOD, CO

City & State

ENGLEWOOD, CO

Zip

80112

Country

USA

Zip

80112

Country

USA

4. FEI Number

74-2942142

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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.

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, 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	D	☐ Delete
NAME	MISCHER, WALTER M JR.	
STREET ADDRESS	8550 KATY FREEWAY, SUITE 300	
CITY-ST-ZIP	HOUSTON TX 77024	
TITLE	VD	☒ Delete
NAME	HAMPTON, KEVIN M	
STREET ADDRESS	7670 SOUTH CHESTER STREET, SUITE 100	
CITY-ST-ZIP	ENGLEWOOD CO 80112	
TITLE	ACON	☐ Delete
NAME	KELL, WILLIAM	
STREET ADDRESS	7777 MARKET CENTER AVE.	
CITY-ST-ZIP	EL PASO TX 79912	
TITLE	AS	☒ Delete
NAME	SCHAEFER, SUSAN M	
STREET ADDRESS	7670 SOUTH CHESTER STREET, SUITE 100	
CITY-ST-ZIP	ENGLEWOOD CO 80112	
TITLE	AS	☒ Delete
NAME	CHAPMAN, SUSAN E	
STREET ADDRESS	11 SOUTH LASALLE STREET, 2ND FLOOR	
CITY-ST-ZIP	CHICAGO IL 60603	
TITLE	AS	☒ Delete
NAME	LARSON, ANDREW J	
STREET ADDRESS	7670 SOUTH CHESTER STREET, SUITE 100	
CITY-ST-ZIP	ENGLEWOOD CO 80112	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DS	☐ Change ☒ Addition
NAME	R SCOT SELLERS	
STREET ADDRESS	7670 S. CHESTER STREET, STE. 100	
CITY-ST-ZIP	ENGLEWOOD, CO 80112	
TITLE	D	☐ Change ☒ Addition
NAME	WILLIAM M. WHITELESS, III	
STREET ADDRESS	2001 KIRBY DRIVE, SUITE 514	
CITY-ST-ZIP	HOUSTON, TX 77019-6096	
TITLE	D	☐ Change ☒ Addition
NAME	THOMAS B. ALLIN	
STREET ADDRESS	125 LINCOLN STREET	
CITY-ST-ZIP	SANTA FE, NM 87501	
TITLE	V	☐ Change ☒ Addition
NAME	TIMOTHY R WELSH	
STREET ADDRESS	7630 S. CHESTER ST., SUITE 190	
CITY-ST-ZIP	ENGLEWOOD, CO 80112	
TITLE	PM	☐ Change ☒ Addition
NAME	JEFFRY A. JONES	
STREET ADDRESS	7630 S. CHESTER ST., SUITE 190	
CITY-ST-ZIP	ENGLEWOOD, CO 80112	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Jeffry A. Jones Jeffry A. Jones

Date

3.10.00

Daytime Phone #

303.7085797

CR2E034 (9/99)