

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H10323 (4)
1. Corporation Name
TCID OF FLORIDA, INC.

Principal Place of Business
5619 DTC PARKWAY
TAX DEPT.
ENGLEWOOD CO 80111
US

Mailing Address
P.O. BOX 5630
TAX DEPT.
DENVER CO 80217
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/29/1984

4. FEI Number
84-0977942

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS ST.
STE. 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida 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 Florida. 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, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AVP
GOOKIN, NOLAN
5619 DTC PARKWAY
ENGLEWOOD CO ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BARBERINI, THOMAS R
5619 DTC PARKWAY
ENGLEWOOD CO ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BLAYLOCK, GARY
5619 DTC PARKWAY
ENGLEWOOD CO ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT
SCHOTTERS, II B W.
5619 DTC PARKWAY
ENGLEWOOD CO ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
BRETT, STEPHEN M
5619 DTC PARKWAY
ENGLEWOOD CO ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP AV ☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP D
JONES, MARVIN
5619 DTC PARKWAY
ENGLEWOOD, CO 80111 ☐ Change ☒ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

GARY BLAYLOCK

4/24/98

303-267-5500

CR2E034 (10/97)