

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90150 043 ***150.00

DOCUMENT # H75052

1. Entity Name

THE BOX WORLDWIDE, INC.

Principal Place of Business

**9197 S PEORIA ST
 ATTN LIBERTY TAX DEPT
 ENGLEWOOD CO 80112
 US**

Mailing Address

**PO BOX 5630
 ATTN LIBERTY TAX DEPT
 DENVER CO 80217
 US**

2. Principal Place of Business
12300 Liberty Blvd

3. Mailing Address
12300 Liberty Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Englewood, CO

City & State

Englewood, CO

Zip
80112

Country
USA

Zip
80112

Country
USA

4. FEI Number

59-2605267

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM, INC
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCED MASTERS, LEE 9197 S PEORIA STREET ENGLEWOOD CO 80112	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVST ROZELLS, MARK 9197 S PEORIA STREET ENGLEWOOD CO 80112	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOFF, DAVID B 1221 COLLINS AVE MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLAYLOCK, GARY 9197 S PEORIA STREET ENGLEWOOD CO 80112	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, ROBERT R 1221 COLLINS AVE MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS TANABE, CHARLES 9197 S PEORIA STREET ENGLEWOOD CO 80112	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Robert R. Bennett 12300 Liberty Blvd Englewood, CO 80112	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Charles Y. Tanabe 12300 Liberty Blvd Englewood, CO 80112	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer David Flowers 12300 Liberty Blvd Englewood, CO 80112	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gary Blaylock 12300 Liberty Blvd Englewood, CO 80112	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director John C. Malone 12300 Liberty Blvd Englewood, CO 80112	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Gary S. Howard 12300 Liberty Blvd Englewood, CO 80112	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gary Blaylock/Vice President

Date

4/12/02

Daytime Phone #

720-875-5400

CR2E034 (9/01)