2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M0100001909

SIGNATURE:

CCIP PALM LAKE, L.L.C.



FILED

303-757-8101

Daytime Phone #

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Principal Place 2000 SOUTH C STE. 2-1000 DENVER CO 80	OLORADO BI		wo	Mailing Address . 2000 SOUTH COLORADO BLVD TOWER TWO STE. 2-1000 DENVER CO 80222				DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA									
Principal Place of Business 4582 S. ULSTER ST. PKWY.				3. Mailing Address 4582 S. ULSTER ST. PKWY.													
Suite, Apt. #, etc				Suite, Apt. #, etc. SUITE 1100					CHECK HERE IF MAKING CHANGES								
City & State DENVER				City & State DENVER			<u> </u>		4. FEI Number 84-1612274					pplied For ot Applicab	le		
Zip	80237	Country	US	Zip	80237	Count	try	US	5. Certifica	te of Sta	atus Desir	ed		5.00 Ad		_	
	6. Name	and Address	of Current R	egistered Age	nt				7. Name ar	nd Addı	ress of No	ew Regi	stered A	gent	-:-		
CORPORATION SERVICE COMPANY								Name									
1201	I HAYS STI						Street Address (P.O. Box Number is Not Acceptable)										
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							City						FL	Zip Coo	ie	7	
8. The above the obligati	named entity ions of regist		statement for t	he purpose of	changing its r	egistere	ed office or	registere	ed agent, or b	oth, in t	he State	of Florid	a. I am fa	miliar with,	and accep	1	
SIGNATURE .	Signature, typed	or printed name of r	egistered agent and	d title if applicable.	(NOTE:	Registered	d Agent signatu	re required	when reinstating)		·		DATE				
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				Make Ch	eck Payable	to Fig		artmen	nt of State								
9.	MANAGING MEMBERS/MANAGERS 10										ADDITIO	DNS/CH	IANGES			ᅱ	
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11. I hereby c	ertify that the	information s	upplied with th	nis filing does r	not qualify for t	he exer	mption state	ad in Sec	tion 119.07(3	3)(i), Flo	rida Statu	tes. I fur	ther certif	y that the i	nformation	\dashv	
indicated	on this repor	t is true and ac	ccurate and th	at my signatur mpowered to	e shall have th	ie same	legal effec	t as if ma	ade under oa	th; that	lam a ma	anaging	member	or manage	er of the	-	

TEGURED CHAD ASARCH, AUTHORIZED REP.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE