FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

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FILED
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1997	DIVISIO	N OF CORF	ORATIONS		199	1 APR ZI	AIT 10. II			
Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee 3 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE					SECRETARY OF STATE TALLAHASSEE. FLORIDA					
Name and Malling Address of Limited Liability Company	MENT # _{M96}	00000	0421							
SMF SILVER LAKE MANAGEMENT LLC 3600 S. YOSEMITE ST., 10TH FLOOR DENVER CO 80237				360	1a. Principal Place of Business Address 3600 S. YOSEMITE ST., 10TH FL DENVER CO 80237					
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a 2. Principal Place of Business 2a. Mailing Address				ate Organiza	ed or Qualified	3a. State of Formation				
2. Principal Place of Business 2a. Mailir		ig Address								
Suite, Apt. #, etc. Suite, Apt		. #, etc.			10/24/1996 4. FEI Number		CO Applied For			
City & State	City & State	te				61732				
Zip Country	Zip	Count	У	5 . D	ate of Last F	Report	6. Certificate of Status Desired 88.75 Additional Fee Required			
7. Name and Address of Current	Registered Agent		 	8. Na	ne and Add	ress of New Re	gistered Agent			
C T. CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the all its registered office or registered agent, or both, in the State of Florida. Such change was a as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature)				Street Address (P.O. Box Number le Not Acceptable) 5 5 3 5 6 6 7 7 1 1 1 7 4 - 1 2 4 7 5 7 7 - 1 1 1 7 4 - 1 2 4 7 5 7 7 5 7 7 5 7 7 5 7 7 5 7 7 7 7 7						
10. Title Managing Members/Manager	s	Business Street Add				City	, State and Zip Code			
MGR MILLER, ANDREW S MGR SEVO, JOHN M MGR FRISHMAN, DAVID S	3600	S. YO	SEMITE	ST.,	10тн	DENVER DENVER DENVER	СО			
				la Cauri	40.07(0) (0)		United the Information			

Indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

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