

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N21023

1. Entity Name

RIVER REACH COMMUNITY SERVICES ASSOCIATION, INC.

Principal Place of Business

7200 WISCONSIN AVENUE  
1100  
BETHESDA MD 20814

Mailing Address

7200 WISCONSIN AVENUE  
1100  
BETHESDA MD 20814

2. Principal Place of Business

2000 S. Colo Blvd.,

Suite, Apt. #, etc.

Tower Two #2-1000

City & State

Denver, CO

Zip

80222

Country

USA

3. Mailing Address

2000 S. Colo Blvd.

Suite, Apt. #, etc.

Tower Two #2-1000

City & State

Denver, CO

Zip

80222

Country

USA

DO NOT WRITE IN THIS SPACE

REINSTATEMENT

4. FEI Number

59-2817173

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

7. Name and Address of New Registered Agent

Name

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

3000 S. Colo Blvd. #2-1000

-11/14/01--01091--017

\*\*\*\*175.00 \*\*\*\*175.00

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

Deborah D. Skipper

Deborah D. Skipper

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

(NOTE: Registered Agent must sign when reinstating)

DATE

3000 S. Colo Blvd. #2-1000

-11/14/01--01091--017

\*\*\*\*\*51.25 \*\*\*\*\*61.25

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE SD  
NAME UTTER, PATRICK L  
STREET ADDRESS 3003 TAMiami TRAIL N  
CITY-ST-ZIP NAPLES FL

☒ Delete

TITLE VD  
NAME BRUET, MICHAEL J  
STREET ADDRESS 3003 TAMiami TRAIL NORTH  
CITY-ST-ZIP NAPLES FL

☒ Delete

TITLE TD  
NAME MASON, CHARLES H  
STREET ADDRESS 3003 TAMiami TRAIL N  
CITY-ST-ZIP NAPLES FL

☒ Delete

TITLE PD  
NAME BIRR, JEFFREY M  
STREET ADDRESS 3003 TAMiami TRAIL NORTH  
CITY-ST-ZIP NAPLES FL

☒ Delete

TITLE AT  
NAME KURTYKA, DEBORAH L  
STREET ADDRESS 3003 TAMiami TRAIL NORTH  
CITY-ST-ZIP NAPLES FL

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ID  
NAME Peter Kompaniez  
STREET ADDRESS 2000 S. Colo Blvd., Tower Two #2-1000  
CITY-ST-ZIP Denver, CO 80222

☐ Change ☒ Addition

TITLE VP ID  
NAME Harry Alcock  
STREET ADDRESS 2000 S. Colo Blvd., Tower Two #2-1000  
CITY-ST-ZIP Denver, CO 80222

☐ Change ☒ Addition

TITLE Secretary  
NAME Joel Bonder  
STREET ADDRESS 2000 S. Colo Blvd., Tower Two #2-1000  
CITY-ST-ZIP Denver, CO 80222

☐ Change ☒ Addition

TITLE Treasurer  
NAME Patricia Heath  
STREET ADDRESS 2000 S. Colo Blvd., Tower Two #2-1000  
CITY-ST-ZIP Denver, CO 80222

☐ Change ☒ Addition

TITLE D  
NAME TERRY, CONSIDINE  
STREET ADDRESS 2000 S. Colo Blvd. Tower Two #2-1000  
CITY-ST-ZIP Denver, CO 80222

☐ Change ☐ Addition

TITLE AS  
NAME Deborah C. Hokanson  
STREET ADDRESS 2000 S. Colo Blvd. Tower Two #2-1000  
CITY-ST-ZIP Denver, CO 80222

☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Deborah C. Hokanson, Asst. Secy, 11-02-01 (303) 757-8101

APPROVED  
AND  
FILED

01 NOV -6 PM 3: 07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



0016000

CR2E037 (5/01)



ACCOUNT NO. : 072100000032

REFERENCE : 324386 5124005

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : November 5, 2001

ORDER TIME : 12:40 PM

ORDER NO. : 324386-005

CUSTOMER NO: 5124005

CUSTOMER: Ms. Deborah Hokanson  
Aimco  
2000 South Colorado Blvd.  
Tower Two, Suite 2-1000  
Denver, CO 80222

ANNUAL REPORT FILING

NAME: RIVER REACH COMMUNITY SERVICES  
ASSOCIATION, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight-EXT#1156

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
01 NOV -6 PM 2:25  
DIVISION OF CORPORATION