

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0103152

DOCUMENT # N21023

1. Entity Name

RIVER REACH COMMUNITY SERVICES ASSOCIATION, INC.



FILED

03 JUN 11 PM 12:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☒ CHECK HERE IF MAKING CHANGES

Principal Place of Business

2000 S COLO BLVD TOWER TWO #2-1000
DENVER CO 80222

Mailing Address

2000 S COLO BLVD TOWER TWO #2-1000
DENVER CO 80222

2. Principal Place of Business

4582 S. ULSTER ST. PKWY.

Suite, Apt. #, etc.

SUITE 1100

City & State

DENVER

Zip

80237

Country

US

3. Mailing Address

4582 S. ULSTER ST. PKWY.

Suite, Apt. #, etc.

SUITE 1100

City & State

DENVER

Zip

80237

Country

US

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)

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. I am familiar with, and accept the obligations of registered agent.

300020778623
06/11/03--01027--012 ***12075.00

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	KOMPANIEZ, PETERS	
STREET ADDRESS	2000 S COLO BLVD TOWER TWO #2-1000	
CITY-ST-ZIP	DENVER CO 80222	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HARRY, ALCOCK	
STREET ADDRESS	2000 S COLO BLVD TOWER TWO #2-1000	
CITY-ST-ZIP	DENVER CO 80222	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BONDER, JOEL	
STREET ADDRESS	2000 S COLO BLVD TOWER TWO #2-1000	
CITY-ST-ZIP	DENVER CO 80222	
TITLE	T	<input type="checkbox"/> Delete
NAME	HEATH, PATRICIA	
STREET ADDRESS	2000 S COLO BLVD TOWER TWO #2-1000	
CITY-ST-ZIP	DENVER CO 80222	
TITLE	D	<input type="checkbox"/> Delete
NAME	CONSIDINE, TERRY	
STREET ADDRESS	2000 COLO BLVD TWOER TWO #2-1000	
CITY-ST-ZIP	DENVER CO 80222	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	HOKANSON, DEBORAH C	
STREET ADDRESS	2000 S COLO BLVD TOWER TWO #2-1000	
CITY-ST-ZIP	DENVER CO 80222	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	4582 S. ULSTER ST. PKWY. SUITE 1100 DENVER, CO 80237
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	4582 S. ULSTER ST. PKWY. SUITE 1100 DENVER, CO 80237
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	4582 S. ULSTER ST. PKWY. SUITE 1100 DENVER, CO 80237
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	4582 S. ULSTER ST. PKWY. SUITE 1100 DENVER, CO 80237
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

~~SIGNATURE REQUIRED~~

CHAD ASARCH, ASST SECRETARY 6/4/03

303-757-8101

CR2E037 (10/02)