

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000082933

1. Entity Name

EIRE DENVER SPE, INC.

Principal Place of Business

2840 NW BOCA RATON BLVD SUITE 101  
BOCA RATON FL 33431

Mailing Address

2840 NW BOCA RATON BLVD SUITE 101  
BOCA RATON FL 33431

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4.

**FILED**  
**May 19, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90096 038 \*\*\*150.00

40208



DO NOT WRITE IN THIS SPACE

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPILLANE, MARK  
2840 NW BOCA RATON BLVD SUITE 101  
BOCA RATON FL 33431

Name Spillane & Company  
Street Address (P.O. Box Number is Not Acceptable)  
2840 NW Boca Raton Blvd  
Suite 101  
City Boca Raton FL Zip Code 33431

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

Spillane & Company Inc. by Mark D. Spillane as President 1/1/01  
(NOTE: Registered Agent signature required when: (a) first filing; (b) change of agent; (c) change of address; (d) change of name; (e) change of state of incorporation; (f) change of jurisdiction of organization; (g) change of type of entity; (h) change of business purpose; (i) change of fiscal year; (j) change of accounting method; (k) change of tax status; (l) change of other information required by law.)

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, 2001 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
<input type="checkbox"/> Delete			
<input type="checkbox"/> Delete			
<input type="checkbox"/> Delete			
<input type="checkbox"/> Delete			
<input type="checkbox"/> Delete			
<input type="checkbox"/> Delete			

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	PID MARK D. SPILLANE	2840 NW BOCA RATON BLVD STE 101	BOCA RATON, FL 33431
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	DIRECTOR WILLIAM CLARK	2840 NW Boca Raton Blvd Ste 101	Boca Raton FL 33431
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> Change <input 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:

Mark D. Spillane as President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/1/01 561-742-1201

CR2E034 (10/00)