

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P05921

1. Entity Name

SHELTER REALTY V CORPORATION OF SOUTH CAROLINA

Principal Place of Business

Mailing Address

55 BEATTIE PLACE  
GREENVILLE SC 29601  
US

PO BOX 1089  
GREENVILLE SC 29602-1089  
US

2. Principal Place of Business  
2000 S. Colorado Boulevard

3. Mailing Address  
2000 S. Colorado Boulevard

Suite, Apt. #, etc.  
Tower Two, Suite 2-1000

Suite, Apt. #, etc.  
Tower Two, Suite 2-1000

City & State  
Denver, CO

City & State  
Denver, CO

Zip  
80222

Country  
USA

Zip  
80222

Country  
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number  
57-0720607

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

THE PRENTICE HALL CORP. SYSTEM, INC.  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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, 2000 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	P KOMPANIEZ, PETER K 1873 SO. BELLAIRE ST., 17TH FLR DENVER CO 80222-4300	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVL BONDER, JOEL F 1873 SO. BELLAIRE ST., 17TH FLR DENVER CO 80222-4300	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT HEATH, PATRICIA K 1873 SO. BELLAIRE ST., 17TH FLR DENVER CO 80222-4300	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP FOYE, PATRICK L 1873 SO. BELLAIRE ST., 17TH FLR DENVER CO 80222-4300	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP TOOMEY, THOMAS W 1873 SO. BELLAIRE ST., 17TH FLR DENVER CO 80222-4300	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPC LONG, MARTHA L 55 BEATTIE PLACE GREENVILLE SC 29601	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres/Dir. 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/Sec. 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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: By: Joel Bonder **REQUIRED** Joel Bonder, EVP/Sec. 4-17-00 (303) 757-8101  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)