

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P05978

1. Entity Name

SHELTER REALTY II CORPORATION OF SOUTH CAROLINA

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90084 017 ***150.00

Principal Place of Business Mailing Address
55 BEATTIE PLACE P O BOX 1089
SC 29602 GREENVILLE SC 29602-1089
US

2. Principal Place of Business 3. Mailing Address
2000 S. Colorado Boulevard 2000 S. Colorado Boulevard
Suite, Apt. #, etc. Suite, Apt. #, etc.
Tower Two, Suite 2-1000 Tower Two, Suite 2-1000
City & State City & State
Denver, CO Denver, CO
Zip Country Zip Country
80222 USA 80222 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 57-0708639 Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent THE PRENTICE HALL CORP SYSTEM, INC.
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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (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	SVPC LONG, MARTHA L 55 BEATTIE PLACE GREENVILLE SC 29602 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	President/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222
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	EVP/Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222
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	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2000 S. Colo. Blvd., TowerTwo, #2-1000 Denver, CO 80222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP FOYE, PATRICK J 1873 SO BELLAIRE ST 17TH FLR DENVER CO 80222-4300 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222
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	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition COO 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222

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, EVP/Secretary 4-20-00 (303) 757-8101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)