## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0722  1. Entity Name  AMREAL REALTY, INC.	7		FILED Apr 20, 2000 8:00 Secretary of Stat	e
Principal Place of Business  1873 SOUTH BELLAIRE STREET SUITE 1700 DENVER CO 80222 US	Mailing Address  1873 SOUTH BELLAIRE STRE SUITE 1700 DENVER CO 80222-4380 US	EET	1 30.00	(1 100)
2. Principal Place of Business 2000 South Colorado Blvd. Suite, Apt. #, etc. Tower Two, Suite 2-1000	3. Mailing Address 2000 South Cold Suite, Apt. #, etc. Tower Two, Suite		DO NOT WRITE IN THIS SPACE	
City & State Denver, CO Zip Country 80222 USA	City & State Denver, CO Zip 80222	Country USA_	5. Certificate of Status Desired   \$8.75 Addition Fee Required	plicable
6. Name and Address of Cur CORPORATION SERVICE COMPAI 1201 HAYS STREET TALLAHASSEE FL 32301-2525		Name Street Addres	7. Name and Address of New Registered Agent ss (P.O. Box Number is Not Acceptable)  FL Zip Code	
8. The above named entity submits this statement  SIGNATURE  Signature, typed or printed name of registered  9. This corporation is eligible to satisfy its Intan Tax filling requirement and elects to do so. (See criteria on back)	agent and title if applicable. (NOTE:	Registered Agent signature requirements I FEE IS \$150.00  O Fee will be \$550.0	uired when reinstating)  10. Election Campaign Financing  Trust Fund Contribution.	
TITLE PD KOMPANIEZ, PETER 1873 S. BELLAIRE STREET, DENVER CO 80222	AND DIRECTORS  Delete #1700		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  RxChange  00 S. Colo. Blvd., Tower Two, #2-100  nver, CO 80222	] Addition
TITLE VPS NAME BONDER, JOEL STREET ADDRESS CITY-ST-ZIP DENVER CO 80222	☐ Delete #1700	NAME STREET ADDRESS 200	P/Sec. Exchange C 00 S. Colo. Blvd., Tower Two, #2-100 nver, CO 80222	Addition
NAME HEATH, PATRICIA STREET ADDRESS CITY-ST-ZIP DENVER CO 80222		CITY-ST-ZIP Der	00 S. Colo. Blvd., Tower Two, #2-100	_
NAME STREET ADDRESS CITY-ST-ZIP CREENVILLE SC CITYLOG C C C C C C C C C C C C C C C C C C C	X Delete	STREET ADDRESS 200	trick J. Foye 00 S. Colo. Blvd., Tower Two, #2-100 over, CO 80222	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP  AS BUECHLER, KELLEY M ONE INSIGNIA FIANCIAL PL GREENVILLE SC	AZA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐	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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joel-Bonder, EVP/Secretary 4-14-00 ICER OR DIRECTOR