

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 19, 2000 8:00 am**  
**Secretary of State**

04-19-2000 90034 001 \*\*\*150.00

**DOCUMENT # P10622**

1. Entity Name

**DBL PROPERTIES CORPORATION**

Principal Place of Business	Mailing Address
SOUTH BELLAIRE STREET CO 80222-4300	1873 SOUTH BELLAIRE STREET DENVER CO 80222-4358 US

**639100**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2000 South Colorado Blvd. Suite, Apt. #, etc. Tower Two, Suite 2-1000	2000 South Colorado Blvd. Suite, Apt. #, etc. Tower Two, Suite 2-1000

City & State	City & State	4. FEI Number	Applied For
Denver, CO	Denver, CO	13-3130678	<input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country
80222	USA	80222	USA

5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
----------------------------------	--------------------------	--------------------------------

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	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	CEOC	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONSIDINE, TERRY	NAME	
STREET ADDRESS	1873 SOUTH BELLAIRE STREET	STREET ADDRESS	2000 S. Colo. Blvd., Tower Two, #2-1000
CITY-ST-ZIP	DENVER CO 80222-4300	CITY-ST-ZIP	Denver, CO 80222
TITLE	P	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOMPANIEZ, PETER K	NAME	
STREET ADDRESS	1873 SOUTH BELLAIRE STREET	STREET ADDRESS	2000 S. Colo. Blvd., Tower Two, #2-1000
CITY-ST-ZIP	DENVER CO 80222-4300	CITY-ST-ZIP	Denver, CO 80222
TITLE	EVGS	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BONDER, JOEL F.	NAME	
STREET ADDRESS	1873 SOUTH BELLAIRE STREET	STREET ADDRESS	2000 S. Colo. Blvd., Tower Two, #2-1000
CITY-ST-ZIP	DENVER CO 80222-4300	CITY-ST-ZIP	Denver, CO 80222
TITLE	EVP	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOYE, PATRICK J	NAME	
STREET ADDRESS	1873 SOUTH BELLAIRE STREET	STREET ADDRESS	2000 S. Colo. Blvd., Tower Two, #2-1000
CITY-ST-ZIP	DENVER CO 80222-4300	CITY-ST-ZIP	Denver, CO 80222
TITLE	EVP	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOWARD, ROBERT TY	NAME	
STREET ADDRESS	1873 SOUTH BELLAIRE STREET	STREET ADDRESS	
CITY-ST-ZIP	DENVER CO 80222-4300	CITY-ST-ZIP	
TITLE	EVP	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	IRA, STEVEN D	NAME	
STREET ADDRESS	1873 SOUTH BELLAIRE STREET	STREET ADDRESS	2000 S. Colo. Blvd., Tower Two, #2-1000
CITY-ST-ZIP	DENVER CO 80222-4300	CITY-ST-ZIP	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 Joel Bonder, Secretary 4-6-00 (303) 757-8101  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)