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FILED
May 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P19986

(9)

1. Corporation Name

UNITED ADVERTISING NETWORK, INC.

Principal Place of Business

5619 DTC PARKWAY, 6TH FLOOR, TAX
ENGLEWOOD CO 80111

Mailing Address

5619 DTC PARKWAY, 6TH FLOOR, TAX
ENGLEWOOD CO 80111-3017



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/08/1988		3a. Date of Last Report 05/01/1996	
21	Suite, Apt. #, etc.	26	P. O. BOX 5630	4. FEI Number 84-1086437		Applied For Not Applicable	
22	City & State	27	TAX DEPT	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	DENVER, CO 80217-5630	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	80217-5630	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
25		30	US	10. Name and Address of New Registered Agent			

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLOUSTON, BERNADAN R.	1.2 NAME	
STREET ADDRESS	5619 DTC PARKWAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD CO	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARSHALL, BARRY P	2.2 NAME	
STREET ADDRESS	5619 DTC PARKWAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD CO	2.4 CITY-ST-ZIP	
TITLE	AV	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALSEY, GREG	3.2 NAME	
STREET ADDRESS	5619 DTC PARKWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD CO	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRACKEN, GARY K	4.2 NAME	
STREET ADDRESS	5619 DTC PARKWAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD CO	4.4 CITY-ST-ZIP	
TITLE	TVP	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHOTTERS, BERNARD W II	5.2 NAME	
STREET ADDRESS	5619 DTC PARKWAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD CO	5.4 CITY-ST-ZIP	
TITLE	AVP	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOOKIN, NOLAN	6.2 NAME	
STREET ADDRESS	5619 DTC PARKWAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD CO	6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE

CR2E034 (9/96)