## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 30, 2001 8:00 am Secretary of State **DOCUMENT # P31078** 1. Entity Name GWL PROPERTIES, INC. 01-30-2001 90130 021 \*\*\*150.00 Principal Place of Business Mailing Address 5000 DTC-PARKWAY 5000-DTO-PARKWAY ENCLEWOOD CO BOTH ENGLEWOOD CO 1011 2. Principal Place of Business 8745 E. Orchard Rd. 3. Mailing Address 8745 E. Orchard Rd. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 500 500 City & State Applied For City & State 4. FEI Number 84-1096239 Greenwood Greenwood Not Applicable \$8.75 Additional 5. Certificate of Status Desired 8011 USA80111 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Change ☐ Addition TITLE □ Delete TITLE THOMSON, DAVID J. NAME NAME 3705 E. WARREN AVE. STREET ADDRESS STREET ADDRESS **DENVER CO** CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Detete TITLE Change GRAY, M.T. NAME NAME 335 OVIDA PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CASTLE ROCK CO CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME ---CAHAN-J. E NAME STREET ADDRESS 501 DETROIT ST STREET ADDRESS CITY-ST-7IP **DENVER CO** CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE HUGHES, JACK T. NAME NAME

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.

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-78P

TITLE

NAME

TITLE

NAME STREET ADDRESS 2230 RIDGE PLAZA

CASTLE ROCK CO

GRATTON, ROBERT

105 MAPLEWOOD AVE.

OUTREMONT, QUEBEC

DESMARAIS, PAUL, JR.

3120 CHEMIN DAULAC

WESTMONT, QUEBEC

SIGNATURE AND TYPED OR PRINTEDNAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

David J. Thomson

1/8/01

303 737-338

☐ Addition

Addition

Daytime Phone #

☐ Change

Change