## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



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

**DOCUMENT #** 

P34264

101

ROCKY MOUNTAIN CONSULTANTS, INC.  Principa' Place of Business Mailing Address								
700 FLORIDA AVE #500 700 FLORIDA AVE #500 LONGMONT CO 80501 LONGMONT CO 80501								
Principal Di	lace of Business				te incorporated or Qualified <b>06/11/1991</b>		o of Last F	•
	Delaware Avenue	28. Mailing Address	Daware Ave		Number 84-0628456			Applied For
Suite, Apt.	•	Suite, Apt. #, etc					\$8.7	Not Applicable  Additional
	500	27 # 500	<u> </u>	<b>3.</b> Ce	rtificate of Status Desired			Required
	ergeont, Co	City & State	entr, co		ction Campaign Financing ist Fund Contribution			O May Be d to Fees
71p <b>&amp;</b>	Country Country 25 Bulder	29 60501	Country 30	B. Thi	s corporation has liability for	or intangible ta		
	9. Name and Address of Currer	nt Registered Agent			me and Address of New		Agent	
			81 Name					
	, CARMEN G.		82 Stree	82 Street Address (P.O. Box Number is Not Acceptable)				
	SW 35TH WAY					атнеј		
GAINES	SVILLE FL 32601		83					
			84 City				85 Z	D Code
						FL	1 1	
Pursuant t	to the provisions of Sections 607 0503	and CO7 1ED9 Florida Cu	- ".			<u></u>	•	
Pursuant to or register	to the provisions of Sections 607.0502 red agent, or both, in the State of Florid	and 607.1508, Florida Sta da. Such change was autho	atutes, the above named orized by the correction	corporation submissions board of director	its this statement for the pors. I hereby accept the an			egistered offic
familiar wit	to the provisions of Sections 607.0502 red agent, or both, in the State of Florid th, and accept the obligations of, Sect	and 607.1508, Florida Sta da. Such change was autho ion 607.0505, Florida Statu	atutes, the above named orized by the correction	corporation subm s board of directo	nits this statement for the pors. Thereby accept the ap			egistered offi agent. Lam
familiar wit NATURE	th, and accept the obligations of, Sect	ion 607,0505, Florida Statu	atutes, the above named orized by the corporation' ltes.	SUSPIED TO O'ROCK	ors. I nereby accept the ap	ourpose of cha opointment as		egistered official
familiar wit VATURE	to the provisions of Sections 607,0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Sect Start are typed or proted name of registered agent OFFICERS ANI	ion 607,0505, Florida Statu	atutes, the above named orized by the corporation' ales.  (NOTE Registered Agent signature)	required when real state	ors. I nereby accept the ap	purpose of chappointment as	anging its r registered	agent. I am
familiar wit IATURE	th, and accept the obligations of, Sect Standard typed or printed name of registered agent	ion 607,0505, Florida Statu	atutes, the above named orized by the corporation' ltes.	required when real state	ors. I nereby accept the ap	purpose of cha oppointment as [M] FFICERS AND	anging its registered	agent. I am RS IN 12
familiar wit VATURE	th, and accept the obligations of, Sect  Styrative typod or profed name of registered agent  OFFICERS ANI	ion 607.0505, Florida Statu and their applicable D DIRECTORS	atutes, the above-named orized by the corporation' ates.  NOTE Registered Agent signature.	required when real state	ors. I nereby accept the ap	purpose of cha oppointment as [M] FFICERS AND	anging its r registered	agent. I am
familiar wit	th, and accept the obligations of, Sect  Styrature typod or printed name of registered agreet  OFFICERS ANI  D  VECCHI, JENNIFER  3509 CAMDEN DR	ion 607.0505, Florida Statu and their applicable D DIRECTORS	atutes, the above-named orized by the corporation' ites.  NOTE Registered Agent signature  13.  1 1 TILLE	required when real state	ors. I nereby accept the ap	purpose of cha oppointment as [M] FFICERS AND	anging its registered	agent. I am
FADDRESS	th, and accept the obligations of, Sect  Styrative typed or proted name of registered agreet  OFFICERS ANI  D  VECCHI, JENNIFER  3509 CAMDEN DR  LONGMONT CO	ion 607,0505, Florida Statu and the despiration D DIRECTORS	Alutes, the above-named orized by the corporation' ites.  NOTE Registered Agent signature  13.  1 1 TITLE  1.2 NAME	required when real state	ors. I nereby accept the ap	purpose of cha oppointment as [M] FFICERS AND	anging its registered	agent. I am
FAMILIAN WIT	th, and accept the obligations of, Sect  Styrature typod or printed name of registered agreet  OFFICERS ANI  D  VECCHI, JENNIFER  3509 CAMDEN DR  LONGMONT CO  V	ion 607.0505, Florida Statu and their applicable D DIRECTORS	atutes, the above-named orized by the corporation' ites.  NOTE Registered Agent signature  13.  1 1 TITLE  1.2 NAME  1.3 STREET ADDRESS	required when real state	ors. I nereby accept the ap	ourpose of cha oppointment as DATE FFICERS AND	anging its registered	RS IN 12
FADDRESS ST-ZIP	th, and accept the obligations of, Sect  Styrative typed or printed name of registered agent  OFFICERS ANI  D  VECCHI, JENNIFER  3509 CAMDEN DR  LONGMONT CO  V  DEERE, DON	ion 607,0505, Florida Statu and the despiration D DIRECTORS	natutes, the above-named orized by the corporation' ites.  NOTE Registered Agent signature  13.  1 1 TITLE 1.2 NAME 1.3 STREEL ADDRESS 1.4 CITY-S1-ZIP	required when real state	ors. I nereby accept the ap	ourpose of cha oppointment as DATE FFICERS AND	anging its registered DIRECTO Change	RS IN 12
TADDRESS ST-ZIP	th, and accept the obligations of, Sect  Styruture typed or proted name of registered agreed OFFICERS AND  VECCHI, JENNIFER  3509 CAMDEN DR  LONGMONT CO  V  DEERE, DON  6620 FAIRWAYS DR.	ion 607,0505, Florida Statu and the despiration D DIRECTORS	Atutes, the above-named corized by the corporation ales.  (NOTE Registered Agent signature 13.  1 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TITLE	required when real state	ors. I nereby accept the ap	ourpose of cha oppointment as DATE FFICERS AND	anging its registered DIRECTO Change	agent. I am RS IN 12
TADDRESS ST-ZIP	th, and accept the obligations of, Sect  Styrative typed or preliad name of registered agreed  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO  V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO	and the repulcation  Directors  Delete	Atutes, the above-named conized by the corporation of the corporation	required when real state	ors. I nereby accept the ap	ourpose of cha oppointment as DATE FFICERS AND	anging its registered DIRECTO Change	agent. I am  RS IN 12  Addition
TADDRESS ST-ZIP	th, and accept the obligations of, Sect  Styrative typed or proted name of registered agreed OFFICERS AND  VECCHI, JENNIFER  3509 CAMDEN DR  LONGMONT CO  V  DEERE, DON  6620 FAIRWAYS DR.  LONGMONT CO  D	ion 607,0505, Florida Statu and the d'application D DIRECTORS	Atutes, the above-named corized by the corporation order.  13.  1 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TITLE 22 NAME 2 3 STREET ADDRESS 2.4 CITY-S1-ZIP 3 1 TITLE	required when real state	ors. I nereby accept the ap	ourpose of cha oppointment as [M] FFICERS AND	anging its registered DIRECTO Change	agent. I am  RS IN 12  Addition
FAMILIAN WITH ADDRESS ST-ZIP	th, and accept the obligations of, Sect  Styrative typed or preted name of registered agreed OFFICERS AND  VECCHI, JENNIFER  3509 CAMDEN DR  LONGMONT CO  V  DEERE, DON  6620 FAIRWAYS DR.  LONGMONT CO  D  SHEEDER, G.W. JR.	and the repulcation  Directors  Delete	Alutes, the above-named corized by the corporation' ries.  (NOTE Registered Agent signature 13. 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-2IP 3.1 TITLE 3.2 NAME	required when real state	ors. I nereby accept the ap	ourpose of cha oppointment as [M] FFICERS AND	anging its registered DIRECTO Change Change	RS IN 12 Addition Addition
TADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP	th, and accept the obligations of, Sect  Styrative typed of preted name of registered agreed OFFICERS ANI  D VECCHI, JENNIFER  3509 CAMDEN DR  LONGMONT CO  V  DEERE, DON  6620 FAIRWAYS DR.  LONGMONT CO  D  SHEEDER, G.W. JR.  1529 FRONTIER	and the repulcation  Directors  Delete	Alutes, the above-named corized by the corporation' ries.  (NOTE Registered Agent signature 13. 1 + Title 1.2 NAME 1.3 STREEL ADDRESS 1.4 CITY-SI-2IP 2 + TITLE 2 2 NAME 2 3 STREEL ADDRESS 2 4 CITY-SI-2IP 3 + TITLE 3 2 NAME 3 3 STREEL ADDRESS 3 2 NAME 3 3 STREEL ADDRESS 3 STREEL	required when real state	ors. I nereby accept the ap	ourpose of cha oppointment as [M] FFICERS AND	anging its registered DIRECTO Change Change	RS IN 12 Addition Addition
FADDRESS ST-ZIP  LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS	th, and accept the obligations of, Sect  Styruture typed or preted name of registered agreet  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO  V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO  D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO	and the completable D DIRECTORS DELETE	Alutes, the above-named corized by the corporation' ries.  (NOTE Registered Agent signature 13. 1 + TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-ZIP 3.1 TITLE 3.2 NAMF 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP	required when real state	ors. I nereby accept the ap	DUPPOSE OF CHE POPULATION OF C	anging its registered DIRECTO Change Change Change	RS IN 12 Addition Addition
FAMILIAN WIT NATURE  FT ADDRESS -S1-ZIP  FT ADDRESS -S1-ZIP  FT ADDRESS -S1-ZIP  FT ADDRESS -S1-ZIP	th, and accept the obligations of, Sect  Styrature typed or preted name of registered agreed  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO  V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO  D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO S	and the repulcation  Directors  Delete	Alutes, the above-named corized by the corporation' ries.  (NOTE Registered Agent signature 13. 1 + TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-SI-2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-2IP 4.1 TITLE	required when real state	ors. I nereby accept the ap	DUPPOSE OF CHE POPULATION OF C	anging its registered DIRECTO Change Change	RS IN 12 Addition Addition
familiar wit NATURE FLADDRESS -ST-ZIP ELADDRESS -ST-ZIP ELADDRESS ST-ZIP	th, and accept the obligations of, Sect  Styrative typed or preted name of registered agreed OFFICERS ANI  D VECCHI, JENNIFER  3509 CAMDEN DR  LONGMONT CO  V DEERE, DON  6620 FAIRWAYS DR.  LONGMONT CO  D SHEEDER, G.W. JR.  1529 FRONTIER  LONGMONT CO  S  AULT, DANIEL	and the completable D DIRECTORS DELETE	atutes, the above-named corized by the corporation' ries.  (NOTE Registered Agent signature 13.  1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	required when real state	ors. I nereby accept the ap	DUPPOSE OF CHE POPULATION OF C	anging its registered DIRECTO Change Change Change	RS IN 12 Addition Addition
FADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS T ADDRESS	th, and accept the obligations of, Sect  Styrature typed or preted name of registered agreed  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO  V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO  D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO S	and the completable D DIRECTORS DELETE	atutes, the above-named corized by the corporation' ries.  (NOTE Registered Agent signature 13.  1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	required when real state	ors. I nereby accept the ap	DUPPOSE OF CHE POPULATION OF C	anging its registered DIRECTO Change Change Change	RS IN 12 Addition Addition
familiar wit NATURE  FT ADDRESS -S1-ZIP  FT ADDRESS -S1-ZIP  FT ADDRESS -S1-ZIP	th, and accept the obligations of, Sect  Styrature typod or preted name of registered agreet  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO  V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO  D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO  S AULT, DANIEL 7835 MIDDLEFORK RD.	and the completable D DIRECTORS DELETE	atutes, the above-named corized by the corporation' ries.  (NOTE Registered Agent signature 13.  1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ADE	THE THERBOY ACCEPT THE APPLICATIONS OF AN AMERICAN CHANGES TO OF	CALLETTE CONTRACTOR CO	anging its ricegistered DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS	th, and accept the obligations of, Sect  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO S AULT, DANIEL 7835 MIDDLEFORK RD. BOULDER CO P WILSON, LEONARD	and the completable D DIRECTORS DELETE DELETE	atutes, the above-named corized by the corporation' ries.  (NOTE Registered Agent signature 13.  1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Project Oc. 1	The relative accept the appropriate and the second	CALL CONTROL OF CHARACTERS AND CONTROL	anging its registered DIRECTO Change Change Change	RS IN 12 Addition Addition
familiar wit NATURE  FI ADDRESS -SI-ZIP  FI ADDRESS SI-ZIP  FI ADDRESS SI-ZIP  FI ADDRESS SI-ZIP	th, and accept the obligations of, Sect  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO S AULT, DANIEL 7835 MIDDLEFORK RD. BOULDER CO P WILSON, LEONARD 16233 E. LOUISIANA	and the completable D DIRECTORS DELETE DELETE	atutes, the above-named corized by the corporation' orles.  (NOTE Registered Agent signature 13.  1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAMF 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	Project Oc. 1	The relative accept the appropriate and the second	CALL CONTROL OF CHARACTERS AND CONTROL	anging its ricegistered DIRECTO Change Change Change	Addition  Addition
TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP TADDRESS ST-ZIP	th, and accept the obligations of, Sect  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO S AULT, DANIEL 7835 MIDDLEFORK RD. BOULDER CO P WILSON, LEONARD	and the completable D DIRECTORS DELETE DELETE	atutes, the above-named corized by the corporation' ples.  (NOTE Registured Agent signature 13.  1 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAMF 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	Preside Wild Person	T Word Day	C.	anging its ricegistered DIRECTO Change Change Change	Addition  Addition
familiar wit NATUFE  FT ADDRESS -S1-ZIP  FT ADDRESS -S1-ZIP  FT ADDRESS -S1-ZIP  T ADDRESS -S1-ZIP  T ADDRESS -S1-ZIP  T ADDRESS -S1-ZIP	th, and accept the obligations of, Sect  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO S AULT, DANIEL 7835 MIDDLEFORK RD. BOULDER CO P WILSON, LEONARD 16233 E. LOUISIANA AURORA CO D	and the completable D DIRECTORS DELETE DELETE	Allutes, the above-named corized by the corporation' ples.  (NOTE Registured Agent signature 13.  1 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAMF 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.5 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 ST	Preside Wild Person	The relative accept the appropriate and the second	EXAMPLE CONTROL OF CON	anging its ricegistered DIRECTO Change Change Change	RS IN 12 Addition Addition Addition
T ADDRESS ST-ZIP	th, and accept the obligations of, Sect  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO S AULT, DANIEL 7835 MIDDLEFORK RD. BOULDER CO P WILSON, LEONARD 16233 E. LOUISIANA AURORA CO D SCHULER, WILLIAM	and the Papilicative D DIRECTORS DELETE DELETE DELETE DELETE	Allutes, the above-named corized by the corporation' ples.  13.  1 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAMF 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Preside Wild Person	T Word Day	EXAMPLE CONTROL OF CON	anging its ricegistered  DIRECTO Change Change Change	Addition  Addition  Addition
familiar wit NATURE	th, and accept the obligations of, Sect  OFFICERS ANI  D VECCHI, JENNIFER 3509 CAMDEN DR LONGMONT CO V DEERE, DON 6620 FAIRWAYS DR. LONGMONT CO D SHEEDER, G.W. JR. 1529 FRONTIER LONGMONT CO S AULT, DANIEL 7835 MIDDLEFORK RD. BOULDER CO P WILSON, LEONARD 16233 E. LOUISIANA AURORA CO D	and the Papilicative D DIRECTORS DELETE DELETE DELETE DELETE	atutes, the above-named corized by the corporation' ries.  (NOTE Registured Agent signature 13.  1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TITLE 3.2 NAMF 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-S1-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-S1-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP 6.1 TITLE	Preside Wild Person	T Word Day	EXAMPLE CONTROL OF CON	anging its ricegistered  DIRECTO Change Change Change	Addition  Addition  Addition

SIGNATURE:

SIGNING OFFICER OR DIRECTOR Date Property 1-23-96 303-772-5883