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May 14 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 # P93000006443 (4)

1. Corporation Name
2235 ASSOCIATES, INC.



Principal Place of Business
1201 16TH ST.
#105
DENVER CO 80202

Mailing Address
% JOHN SABISTON
P.O. BOX 297
FT. MYERS FL 33902-0297

3. Date Incorporated or Qualified: 01/22/1993
3a. Date of Last Report: 05/01/1996
4. FEI Number: 65-0415078
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address
25 Suite, Apt. #, etc.
26 City & State
27 Zip Country
28

9. Name and Address of Current Registered Agent
COSTELLO, JAMES M
C/O AVERY, WHIGHAM & WINESETT, P.A
2248 FIRST ST
FORT MYERS FL 33901

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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
TITLE: D CALDIERO, DAVID
NAME: CALDIERO, DAVID
STREET ADDRESS: 5880 S. GOLDSMITH PLACE
CITY-ST-ZIP: ENGLEWOOD CO 80111
 DELETE

TITLE: D MARCUS, BRIAN
NAME: MARCUS, BRIAN
STREET ADDRESS: 2 HITZ PLACE
CITY-ST-ZIP: HICKSVILLE NY 11801
 DELETE

TITLE: D SABISTON, JOHN
NAME: SABISTON, JOHN
STREET ADDRESS: 3480 HANCOCK BRIDGE PKWY.
CITY-ST-ZIP: FT. MYERS FL 33903
 DELETE

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: P/D
1.2 NAME: CALDIERO, DAVID
1.3 STREET ADDRESS: 2640 East 3rd Avenue
1.4 CITY-ST-ZIP: Denver, CO 80206
 Change Addition

2.1 TITLE: T/D
2.2 NAME: MARCUS, BRIAN
2.3 STREET ADDRESS:
2.4 CITY-ST-ZIP:
 Change Addition

3.1 TITLE: V/S/D
3.2 NAME: SABISTON, JOHN
3.3 STREET ADDRESS: 3480 Hancock Bridge Pkwy
3.4 CITY-ST-ZIP: North Fort Myers, Fl. 33903
 Change Addition

4.1 TITLE:
4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY-ST-ZIP:
 Change Addition

5.1 TITLE:
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY-ST-ZIP:
 Change Addition

6.1 TITLE:
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY-ST-ZIP:
 Change Addition

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 on an attachment with an address.

SIGNATURE: [Signature]

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5/10/97

DK dep 165.00