## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR**

Mailing Address

3. Mailing Address

6770 EAST 56TH AVENUE

COMMERCE CITY CO 80022

## P97000007609 **DOCUMENT#**

1. Entity Name

Principal Place of Business

COMMERCE CITY CO 80022

2. Principal Place of Business

Suite, Apt. #, etc.

6770 EAST 56TH AVENUE

DENNIS & PAT PROPERTIES OF FLORIDA, INC.



**FILED** Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90487 020 \*\*\*150.00

TREGANAG

. CHECK HERE IF MAKING CHA	NGES								
6. FEI Number 84-1341726	Applied For								
04-1341720	Not Applicable								

STREET ADDRESS CITY-ST-ZIP  COMMERCE CITY CO 80022  TITLE NAME SPENCER, DENNIS I STREET ADDRESS CITY-ST-ZIP  COMMERCE CITY CO 80022  TITLE NAME SPENCER, DENNIS I STREET ADDRESS CITY-ST-ZIP  TITLE S COMMERCE CITY CO 80022  TITLE NAME SPENCER, PAT STREET ADDRESS CITY-ST-ZIP  TITLE COMMERCE CITY CO 80022  TITLE NAME SPENCER, PAT STREET ADDRESS CITY-ST-ZIP  TITLE NAME SPENCER, PAT STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	Suite, Apt. #, etc.		Sui	uite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
SPENCER, PAT 481 THORRE ROAD ORLANDO FL 32834  Signal Address of Current Registered Agent  City FL Zip Code  6. The above named onliky submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  FILE NOW!!! FEE IS 150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10.  OFFICERS AND DIRECTORS 11.  ADDITIONS/CHANGES TO OFFICERS AND DIR	City & State City		y & State		4.	84-1341726					
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A81 THORPE ROAD ORLANDO FL 32834  Sireet Address (P.O. Box Number is Not Accoptable)  City  FL  Zip Code  City  FL  Zip Code  6. The above named onity submits this statement for the purpose of changing its registered digent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  THE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10.	SPENCER	. PAT						•			
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with other like empowered.

SIGNATURE:

CR2E034 (10/02)