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

DOCHMENT # V62098

111

ncipal Place of Business 95 W. MAIN STREET UITE 230 SPEN CO 81611 S	Mailing Address 435 W. MAIN STREET SUITE 230 ASPEN CO 81611 US		Dieta Mod pro difference	Date of Last Report
			09/04/1992 4. FET Number	12/05/1995 Applied For
Principal Place of Business	2a. Mailing Address 26		65-0376443	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
	27			Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z _{ID} Country	28 Zip	Country	This corporation has lability for intangle	fole tax under s. 199.032,
Zip Country 25	29	30	Florida Statutes 🔲 Yes 💆 N	No
9. Name and Address of Curre			10. Name and Address of New Registe	ered Agent
		81 Name		
SHAPIRO, ROBERT L		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
1645 PALM BEACH LAKES BLVD.		83		
STE. 600 West Palm Beach FL 33401				85 Zip Code
Pursuant to the provisions of Sections 607.050 or registered agent, or both, in the State of Florage.		84 City		FL
	AND DIRECTORS	(OTE: Registered Agent squature reve	Discover (2015) DISCOVERS TO OFFICERS	S AND DIRECTORS IN 12
ILE PTS HAISFIELD ALIDREY LEA	☐ DELÉTÉ	1 1 TITLE		Entrange Link Modello I
HAISFIELD, AUDREY LEA 435 WEST MAIN STREET		1.2 NAME 1.3 STREET ADDRESS		
TREET ADDRESS 439 WEST MAIN STREET TY-ST-ZIP ASPEN CO 81611		1.4 CITY-ST-7IP	Amount 11. / A to the state of	
TLE V	DELETE	2. 1 TITLE		Change Addition
HAISFIELD, RICHARD		2.2 NAME		
TREEI ADDRESS 435 WEST MAIN STREET ASPEN CO 81611		2.3 STREET AUDHESS 2.4 City-St-ZiP		
1Y-ST-7IP ASPEN CO 81611	DELETE	2 4 CITY-SI-ZiP 3 1 TITLE		Change Addition
AME		3 2 NAME		
TREET ADDRESS		3.3 STREFT ADDRESS		
TY-ST-ZIP		3.4 CITY - \$1 - 7IF		Change Addition
1LE	DELETE	4 1 TITLE		Change Addition
AME		4.2 NAME 4.3 STREET AODRESS		
TREET ADDRESS		4.3 STREET ADURESS 4.4 CITY - ST- ZIP		
TY-ST-ZIP	☐ DELETE	5 1 TillE		Change Addition
TLE	-	5.2 NAME		
rle Me		5.3 STREET ADORESS		
ME REET ADDRESS TY - ST- ZIP	Pi Gorese	5 4 CITY - ST - ZIP		Change Addition
ME REET ADDRESS IY-ST-ZIP LE	DELETE	5 4 CITY-ST-ZIP 6 1 TITLE		Change Addition
ME REET ADDRESS ITY-ST-ZIP LE ME	DELETE	5 4 CHY-SI-ZIP 6 1 TITLE 62 NAME		Change Addition
ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS		5 4 CITY-ST-ZIP 6 1 TITLE 62 NAME 63 STHEFT AUDRESS 64 CITY-ST-ZIP		
ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP I. I do hereby certify that the information supplie certify that the information indicated on this at each with Laman effect or director of the contribution.	ed with this filing is voluntarily fundational report or supplemental arrowards on the receiver or trus	5 4 CHY-SI-ZIP 6 1 TITLE 6 2 NAME 6 3 STHEET ADDRESS 6 4 CHY-SI-ZIP urnished and does not qualinate report is true and accided empowered to execute	lify for the exemption stated in Section 119.07(3) curate and that my signature shall have the same eithis report as required by Chapter 607, Florida	ijik), Florida Statutes. I further le legal effect as if macie under
AE EET ADDRESS (-ST-ZIP E AE EET ADDRESS Y-ST-ZIP I do hereby certify that the information supplies	ed with this filing is voluntarily fundational report or supplemental arrowards on the receiver or trus	5 4 CHY-SI-ZIP 6 1 TITLE 6 2 NAME 6 3 STHEET ADDRESS 6 4 CHY-SI-ZIP urnished and does not qualinate report is true and accided empowered to execute		ijik), Florida Statutes. I further le legal effect as if made under