

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F94000003875 (1)**

1. Corporation Name

SAGE CORPORATE GENERAL PARTNER, INC.



Principal Place of Business

SUITE 800
1512 LARIMER
DENVER CO 80202

Mailing Address

SUITE 800
1512 LARIMER
DENVER CO 80202

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified
07/25/1994

3a. Date of Last Report
05/01/1995

4. FEI Number
84-1273344

Applied For
Not Applicable

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

10. Name and Address of New Registered Agent

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 resubmitting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	<input checked="" type="checkbox"/> DELETE
NAME	HAMLET, KENNETH B	
STREET ADDRESS	1512 LARIMER, SUITE 800	
CITY-ST-ZIP	DENVER CO 80202	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	NEUMEYER, ZACHARY T	
STREET ADDRESS	1512 LARIMER, SUITE 800	
CITY-ST-ZIP	DENVER CO 80202	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	ISENBERG, WALTER L	
STREET ADDRESS	1512 LARIMER, SUITE 800	
CITY-ST-ZIP	DENVER CO 80202	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	JOHNSTONE, DAVID T	
STREET ADDRESS	1512 LARIMER, SUITE 800	
CITY-ST-ZIP	DENVER CO 80202	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	ROSENBERG, JAMES	
STREET ADDRESS	1512 LARIMER, SUITE 800	
CITY-ST-ZIP	DENVER CO 80202	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	GREEN, CAROL A	
STREET ADDRESS	1512 LARIMER, STE. 800	
CITY-ST-ZIP	DENVER CO	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	DV ST
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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-03/20/96--01014--020
***600.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carol A. Green

FEB 6, 1996

303 595-7200

CR2E034 (12/95)