

**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 # **J87918** (5)

1. Corporation Name

**SAGE TAMPA, INC.**



Principal Place of Business

Mailing Address

1512 LARIMER  
STE 800  
DENVER CO 80202  
US

1512 LARIMER  
STE 800  
DENVER CO 80202  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. 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

08/18/1987

3a. Date of Last Report

05/01/1995

4. FEI Number

84-1075244

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

(Not Registered Agent signature required for re-statement)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ISENBERG, WALTER L.	
STREET ADDRESS	1624 18TH ST., SUITE 110	
CITY-STATE-ZIP	DENVER CO	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	NEUMEYER, ZACHARY T.	
STREET ADDRESS	1624 18TH ST., SUITE 110	
CITY-STATE-ZIP	DENVER CO	
TITLE	STR	<input checked="" type="checkbox"/> DELETE
NAME	ROSENBERG, JAMES	
STREET ADDRESS	1512 LARIMER, STE 800	
CITY-STATE-ZIP	DENVER CO	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	GREEN, CAROL	
STREET ADDRESS	1512 LARIMER, STE 800	
CITY-STATE-ZIP	DENVER CO	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	1512 LARIMER, # 800
14. CITY-STATE-ZIP	DENVER, CO 80202
2. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	VD ST
23. STREET ADDRESS	1512 LARIMER #800
24. CITY-STATE-ZIP	DENVER, CO 80202
3. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME	
33. STREET ADDRESS	
34. CITY-STATE-ZIP	
4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME	<del>VD</del>
43. STREET ADDRESS	<del>DAVID T. JOHNSTONE</del>
44. CITY-STATE-ZIP	<del>1512 LARIMER #800</del>
5. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52. NAME	VD
53. STREET ADDRESS	DAVID T. JOHNSTONE
54. CITY-STATE-ZIP	1512 LARIMER, # 800
6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	
63. STREET ADDRESS	
64. CITY-STATE-ZIP	

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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 6, 1996

303 595-7200

CR2E034 (12/95)