

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # M56676**

1. Entity Name

**HAMILTON HOUSE, INC.**

**FILED**  
**Apr 27, 2000 8:00 am**  
**Secretary of State**

04-27-2000 90096 008 \*\*\*150.00

Principal Place of Business 1873 S. BELLAIRE ST SUITE 1700 DENVER CO 80222 US	Mailing Address 1873 S. BELLAIRE ST SUITE 1700 DENVER CO 80222-4360 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2000 S. Colorado Boulevard Suite, Apt. #, etc. Tower Two, Suite 2-1000 City & State Denver, CO	3. Mailing Address 2000 S. Colorado Boulevard Suite, Apt. #, etc. Tower Two, Suite 2-1000 City & State Denver, CO
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4. FEI Number <b>65-0014089</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip 80222	Country USA	Zip 80222	Country USA
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO TERRY CONSIDINE 1873 SO. BELLAIRE ST., 17TH FLOOR DENVER CO 80222 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP THOMAS W TOOMEY 1873 SO. BELLAIRE ST., 17TH FLOOR DENVER CO 80222 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STEVEN D IRA 1873 SO. BELLAIRE ST., 17TH FLOOR DENVER CO 80222 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DAVID L WILLIAMS 1873 SO. BELLAIRE ST., 17TH FLOOR DENVER CO 80222 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARRY G ALCOCK 1873 SO. BELLAIRE ST., 17TH FLOOR DENVER CO 80222 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TROY D BUTTS 1873 SO. BELLAIRE ST., 17TH FLOOR DENVER CO 80222 <input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO/Director 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/Director Peter K. Kompaniez 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/Secretary Joel F. Bonder 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP and Treasurer Patricia K. Heath 2000 S. Colo. Blvd., Tower Two, #2-1000 Denver, CO 80222 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: By Joel Bonder **Joel Bonder, EVP/Secretary 4-20-00** (303) 757-8101  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)