

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 03, 2001 8:00 am**  
**Secretary of State**

04-03-2001 90057 015 \*\*\*150.00

0675962

**DOCUMENT # F95000006132**

1. Entity Name

**LIBERTY PROPERTY DEVELOPMENT CORP.**

Principal Place of Business

Mailing Address

**65 VALLEY STREAM PARKWAY, SUITE 100  
 MALVERN PA 19355**

**65 VALLEY STREAM PARKWAY, SUITE 100  
 MALVERN PA 19355**

**938486**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **23-2790437**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>DENNY, JOSEPH P</b> <b>65 VALLEY STREAM PKWY</b> <b>MALVERN PA 19355</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>FENZA, ROBERT E.</b> <b>65 VALLEY STREAM PKWY</b> <b>MALVERN PA 19355</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>BOWES, JAMES J</b> <b>65 VALLEY STREAM PKWY</b> <b>MALVERN PA 19355</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>ALBURGER, GEORGE J JR</b> <b>65 VALLEY STREAM PKWY</b> <b>MALVERN PA 19355</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C</b> <b>ROUSE, WILLARD G</b> <b>65 VALLEY STREAM PKWY</b> <b>MALVERN PA 19355</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DELOACH, THOMAS C</b> <b>65 VALLEY STREAM PARKWAY, SUITE 100</b> <b>MALVERN PA 19355</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice Chairman</b> <b>Denny, Joseph P.</b> <b>65 Valley Stream Parkway</b> <b>Malvern, PA 19355</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Exec. VP &amp; COO</b> <b>Fenza, Robert E.</b> <b>65 Valley Stream Parkway</b> <b>Malvern, PA 19355</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Treasurer</b> <b>Hammers, David</b> <b>65 Valley Stream Parkway</b> <b>Malvern, PA 19355</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President, CEO, Chairman</b> <b>Willard G. Rouse III</b> <b>65 Valley Stream Parkway</b> <b>Malvern, PA 19355</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>see attached rider for additional Directors</b>	<input type="checkbox"/> Change <input 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:** James J. Bowes  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(610) 648-1715

Date Daytime Phone #

James J. Bowes, Secretary

CR2E034 (10/00)

Attachment  
938480  
HF9500006132

**LIBERTY PROPERTY DEVELOPMENT CORP. – BOARD OF DIRECTORS**

<b><u>Name</u></b>	<b><u>Business Address</u></b>
Frederick F. Buchholz	c/o Liberty Property Trust 65 Valley Stream Parkway, Suite 100 Malvern, PA 19355
Joseph P. Denny	Liberty Property Trust 65 Valley Stream Parkway, Suite 100 Malvern, PA 19355
J. Anthony Hayden	c/o Hayden Real Estate, Inc. 2 Tower Bridge, Suite 100 Conshohocken, PA 19428
M. Leanne Lachman	c/o Lend Lease Real Estate 437 Madison Avenue 18 <sup>th</sup> Floor New York, NY 10022
David L. Lingerfelt	c/o LandAmerica Financial Group, Inc. National Projects Office 707 E. Main Street, Suite 400 Richmond, VA 23219
John Miller	c/o Liberty Property Trust 65 Valley Stream Parkway, Suite 100 Malvern, PA 19355
Willard G. Rouse III	Liberty Property Trust 65 Valley Stream Parkway, Suite 100 Malvern, PA 19355
Stephen B. Siegel	c/o Edward S. Gordon Company/Insignia 200 Park Avenue New York, NY 10166