


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 07, 2005 8:00 am**  
**Secretary of State**

02-07-2005 90084 036 \*\*\*150.00

**DOCUMENT # F95000006132**

1. Entity Name  
**LIBERTY PROPERTY DEVELOPMENT CORP.**



Principal Place of Business  
**65 VALLEY STREAM PARKWAY, SUITE 100  
 MALVERN, PA 19355**

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

**50010815**

2. Principal Place of Business  
**500 Chesterfield Parkway**

3. Mailing Address  
**500 Chesterfield Parkway**

Suite, Apt. #, etc.  
 Suite, Apt. #, etc.



01252005 Chg-P CR2E034 (10/03)

City & State  
**Malvern, PA**

City & State  
**Malvern, PA**

Zip **19355** Country **USA** Zip **19355** Country **USA**

4. FEI Number  
**23-2790437**

Applied For  
 Not Applicable

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

**6. Name and Address of Current 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 \_\_\_\_\_

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ 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. I am familiar with, and accept the obligations of registered agent.

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

Signature, typed or printed name of registered agent and title if applicable. DATE

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2005 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSI DENNY, JOESPH P 65 VALLEY STREAM PKWY MALVERN, PA 19355	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COEV FENZA, ROBERT E. 65 VALLEY STREAM PKWY MALVERN, PA 19355	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOWES, JAMES J 65 VALLEY STREAM PKWY MALVERN, PA 19355	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GOLDSCHMIDT, ROBERT 4630 WOODLAND CORP. BLVD STE 150 TAMPA, FL 33614	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEC HANKOWSKY, WILLIAM P 65 VALLEY STREAM PKWY MALVERN, PA 19355	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELOACH, THOMAS C 65 VALLEY STREAM PARKWAY, SUITE 100 MALVERN, PA 19355	<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director of Strategic Initiatives Joseph P. Denny 500 Chesterfield Parkway Malvern, PA 19355	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO + EXEC VP Robert E. Fenza 500 Chesterfield Parkway Malvern, PA 19355	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary James J. Bowes 500 Chesterfield Parkway Malvern, PA 19355	<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	President, CEO, chairman William P. Hankowsky 500 Chesterfield Parkway Malvern, PA 19355	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Thomas C. DeLoach 500 Chesterfield Parkway Malvern, PA 19355	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 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

1-26-04 610 648-7700  
 Date Daytime Phone #

ATTACHMENT  
#F95000006132  
50010815

**LIBERTY PROPERTY DEVELOPMENT CORP.- ADDITIONAL PRINCIPAL OFFICERS**

<b><u>Name</u></b>	<b><u>Title</u></b>	<b><u>Business Address</u></b>
George J. Alburger, Jr.	Executive Vice President	500 Chesterfield Parkway Malvern, PA

ATTACHMENT  
#F9500000632  
50010815

**LIBERTY PROPERTY DEVELOPMENT CORP.- ADDITIONAL DIRECTORS**

<b><u>Name</u></b>	<b><u>Business Address</u></b>
Frederick F. Buchholz	c/o Liberty Property Trust 500 Chesterfield Parkway Malvern, PA 19355
Daniel P. Garton	c/o American Airlines 4333 Amon Carter Blvd. Mail Drop 5625 Fort Worth, TX 76155
J. Anthony Hayden	c/o Beacon Commercial Real Estate, LLC Eight Tower Bridge 161 Washington Street, Suite 1025 Conshohocken, PA 19428
M. Leanne Lachman	c/o Liberty Property Trust 500 Chesterfield Parkway Malvern, PA 19355
David L. Lingerfelt	c/o LandAmerica Exchange Company 9011 Arboretum Pkwy., 3 <sup>rd</sup> Floor Richmond, VA 23236
John Miller	c/o Liberty Property Trust 500 Chesterfield Parkway Malvern, PA 19355
Stephen B. Siegel	c/o CB Richard Ellis, Inc. 200 Park Avenue New York, NY 10166