

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

1062

01 SEP 21 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0010038

DOCUMENT # M00000000362

1. Entity Name
CRE MANAGEMENT IX, LLC

Principal Place of Business: **777 MAIN STREET, SUITE 2100 FORT WORTH TX 76102**

Mailing Address: **777 MAIN STREET, SUITE 2100 FORT WORTH TX 76102**

2. Principal Place of Business: Suite, Apt. #, etc.

3. Mailing Address: Suite, Apt. #, etc.

City & State: City & State

Zip: Country



DO NOT WRITE IN THIS SPACE

4. FEI Number: **75-2862359**

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By September 26, 2001

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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*Manager Crescent Real Estate Equities, Ltd.
777 main st., Ste. 2100
Ft Worth, TX 76102*

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JP 10/1

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: **CRE Management IX, LLC**
by: Crescent Real Estate Equities, Ltd, its manager
by: Elizabeth Hays, Assistant Secretary

Date: **9/17/01** Daytime Phone #: **(817) 321-1456**

STAPLE CHECK HERE

CR2E083 (5/01)



2082

ACCOUNT NO. : 072100000032
 REFERENCE : 554764 5028300
 AUTHORIZATION : *Patricia Pizuto*
 COST LIMIT : \$ 50.00

 ORDER DATE : September 20, 2001
 ORDER TIME : 10:37 AM
 ORDER NO. : 554764-025
 CUSTOMER NO: 5028300
 CUSTOMER: Beth Hays, Legal Asst
 Crescent Real Estate Equities,
 777 Main Street
 Suite 2100
 Fort Worth, TX 76102

RECEIVED
 01 SEP 21 AM 11:32
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: CRE MANAGEMENT IX, LLC

ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - Ext. 1114

EXAMINER'S INITIALS: _____