

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000004043

**Entity Name:** ULI-THE URBAN LAND INSTITUTE (INCORPORATED)**Current Principal Place of Business:**1025 THOMAS JEFFERSON ST. NW, SUITE 500W  
WASHINGTON, DC 20007**Current Mailing Address:**1025 THOMAS JEFFERSON ST. NW, SUITE 500W  
WASHINGTON, DC 20007**FEI Number: 53-0159845****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**COLEMAN, CARLA  
3170 NORTH FEDERAL HIGHWAY  
SUITE 106  
LIGHTHOUSE POINT, FL 33064 US*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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	C
Name	THURBER, LYNN
Address	200 E RANDOLPH DRIVE SUITE4300
City-State-Zip:	CHICAGO IL 60601
Title	CFO
Name	TERSECK, MICHAEL
Address	15306 JORDANS JOURNEY DR
City-State-Zip:	CENTREVILLE VA 20120
Title	T
Name	ROWE, RANDALL
Address	840 S WAUKEGAN ROAD SUITE222
City-State-Zip:	LAKE FOREST IL 60045-2608

Title	CEO
Name	PHILLIPS, PATRICK
Address	4440 VAN NESS STREET NW
City-State-Zip:	WASHINGTON DC 20016
Title	S
Name	LIEBER, ROBERT C
Address	717 FIFTH AVENUE 18TH FLOOR
City-State-Zip:	NEW YORK NY 10022
Title	EO
Name	CUMMINS, CHERYL
Address	2617 HOLLY MANOR DRIVE
City-State-Zip:	FALLS CHURCH VA 22043

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE: MICHAEL TERSECK****CFO****03/05/2014**

Electronic Signature of Signing Officer/Director Detail

Date