

**2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000004043

**Entity Name:** ULI-THE URBAN LAND INSTITUTE (INCORPORATED)**Current Principal Place of Business:**2001 L ST NW, #200  
WASHINGTON, DC 20036**Current Mailing Address:**2001 L STREET NW  
200  
WASHINGTON, DC 20036 US**FEI Number:** 53-0159845**Certificate of Status Desired:** No**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	CHAIRMAN
Name	TOOMEY, THOMAS
Address	1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip:	LITTLETON CO 80129
Title	CFO
Name	TERSECK, MICHAEL
Address	15306 JORDANS JOURNEY DR
City-State-Zip:	CENTREVILLE VA 20120
Title	TREASURER
Name	JOHN, CHANDLER
Address	275 LOCUST ROAD
City-State-Zip:	WINNETKA IL 60093

Title	CEO
Name	PHILLIPS, PATRICK
Address	4440 VAN NESS STREET NW
City-State-Zip:	WASHINGTON DC 20016
Title	SECRETARY
Name	BRINSDEN, JONATHAN H
Address	800 TOWN & COUNTRY BLVD SUITE 200
City-State-Zip:	HOUSTON TX 77024
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****01/16/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date