

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 847299

Entity Name: CB RICHARD ELLIS, INC.

FILED
May 14, 2008
Secretary of State**Current Principal Place of Business:**11150 SANTA MONICA BOULEVARD
SUITE 1600
LOS ANGELES, CA 90025**New Principal Place of Business:****Current Mailing Address:**11150 SANTA MONICA BOULEVARD
SUITE 1600
LOS ANGELES, CA 90025**New Mailing Address:**

FEI Number: 95-2743174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:Title: DCFO () Delete
Name: KAY, KENNETH J
Address: 11150 SANTA MONICA BOULEVARD, SUITE 1600
City-St-Zip: LOS ANGELES, CA 90025Title: DCEO () Delete
Name: WHITE, BRETT
Address: 11150 SANTA MONICA BOULEVARD, SUITE 1600
City-St-Zip: LOS ANGELES, CA 90025Title: DSEV () Delete
Name: MIDLER, LAURENCE H
Address: 11150 SANTA MONICA BOULEVARD, SUITE 1600
City-St-Zip: LOS ANGELES, CA 90025Title: AS () Delete
Name: SANDELLI, RAYMOND
Address: 201 E. KENNEDY BLVD., SUITE 1500
City-St-Zip: TAMPA, FL 33602Title: SVPT () Delete
Name: FAN, DEBERA
Address: 100 NORTH SEPULVEDA BLVD, SUITE 1100
City-St-Zip: EL SEGUNDO, CA 90245**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VP (X) Change () Addition
Name: MOSS, WILLIAM S
Address: 189 SOUTH ORANGE AVENUE, SUITE 1900
City-St-Zip: ORLANDO, FL 32801Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN D. MCALLISTER

SVP

05/14/2008

Electronic Signature of Signing Officer or Director

Date