2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847299

Entity Name: CB RICHARD ELLIS, INC.

FILED Apr 21, 2009 Secretary of State

•		,				
Current Principal Place of Business:			New Principal Place of Business:			
SUITE 160	NTA MONICA I 00 ELES, CA 900					
Current Mailing Address:			New Mailing Address:			
200 EAST LAS OLAS BLVD, STE 1620 FORT LAUDERDALE, FL 33301			11150 SANTA MONICA BOULEVARD SUITE 1600 LOS ANGELES, CA 90025			
FEI Number: 95-2743174 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
1200 SOU	ORATION SYS TH PINE ISLA ION, FL 33324	ND RD.				
	named entity : e of Florida.	submits this statement for the p	urpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUR	RE:					
	Electror	nic Signature of Registered Age	nt		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	KAY, KENNETH	MONICA BOULEVARD, SUITE 1600	Title: Name: Address: City-St-Zip:		(X) Change () Addition ROBERT E 'A MONICA BOULEVARD, SUITE 1600 ES, CA 90025	
Title: Name: Address: City-St-Zip:	WHITE, BRETT	MONICA BOULEVARD, SUITE 1600	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	MIDLER, LAUR	MONICA BOULEVARD, SUITE 1600	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	MOSS, WILLIA	RANGE AVENUE, SUITE 1900	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	FAN, DEBERA	Delete PULVEDA BLVD, SUITE 1100 CA 90245	Title: Name: Address: City-St-Zip:		() Change () Addition	

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 04/21/2009