## 2000 UNIFORM BUSINESS REPORT (UBR

| 2000 UNIFORM BUSI   | NESS REPOR                                      | RT (UBR)                         |  |
|---|---|----------------------------------|--|
| DOCUMENT # B9300000067  |   |                                  |  |
| Trammell Crow Foundation  |   | , Ltd.                           | SECRETARY OF STATE DIVISION OF CORPORATIONS                              |
| Principal Place of Business  ZI DO McKinney Ave. Zloomckinn Suite 700 Dallas Texas 75201  Dallas TX   |   | ey Ave.                          | 00 MAY - I AM 10: 33   |
| 2. Principal Place of Business  | 3. Mailing Address                              | .,,,,,                           | -  |
| Suite, Apt. #, etc.   | Suite, Apt. #, etc.                             |                                  | DO NOT WRITE IN THIS SPACE   |
| City & State City & State   |   |                                  | 4. FEI Number Applied For Not Applicable                                 |
| Zip Country   | Zip · (   | Country ,                        | 5. Certificate of Status Desired   |
|   | 6. Name and Address of Current Registered Agent |                                  | 7. Name and Address of New Registered Agent                              |
| CT Corporation System<br>1200 South Pine Island Road  |   | Name                             |  |
| 1200 South Pine Island Road   |   | Street Address                   | (P.O. Box Number is Not Acceptable)                                      |
| Plantation, FL 3332   | 4   | 0:                               |  |
|   |   | City                             | FL   Zip Code  |
| 8. The above named entity submits this statement for  | the purpose of changing its reg                 | istered office or registe        | ered agent, or both, in the State of Florida.                            |
| SIGNATURE   | d title if applicable. (NOTE: Reg               | gistered Agent signature require | ed when reinstating)  DATE   |
| 9Capital Contributions—   |   |                                  | 11. MAKE CHECK PAYABLE TO DEPT, OF STATE                                 |
| A GENERAL PARTNER TH  | IAT IS A BUSINESS ENTIT                         |                                  | SEE REVERSE SIDE FOR FEE INFORMATION STERED AND ACTIVE WITH THIS OFFICE. |
| NOTE: General Partners MAY  12. GENERAL PARTNER   |   | form; an amendme                 | nt must be filed to change a general partner.  ADDRESS CHANGES ONLY      |
| DOGUMENT CP. BASODOOOOOG F F93,00000  NAME  STREET ADDRESS  CITY-ST-ZIP  Dallas, Texas 75201  |   | STREET ADDRESS                   |  |
|   |   | CITY-ST-ZIP                      | 2000032843227 8<br>-06/12/0001020013                                     |
| DOCUMENT#   | ENT #   |                                  | ****141.25 ****141.25 8  |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |   | CITY-ST-ZIP                      |  |
| DOCUMENT / NAME   |   | STREET ADDRESS                   |  |
| STREET ADDRESS CITY-ST-ZIP  |   | CITY-ST-ZIP                      |  |
| DOCUMENT # NAME   |   | STREET ADDRESS                   |  |
| TREET ADDRESS<br>ITY-ST-ZIP   |   | CITY-ST-ZIP                      |  |
| DOCUMENT ≠ NAME   |   | STREET ADDRESS                   | ·  |
| STREET ADDRESS CITY-ST-ZIP  |   | CITY-ST-ZIP                      |  |
| DOCUMENT # NAME   |   | STREET ADDRESS                   |  |
| ITY-ST-ZIP /  |   | CITY-ST-ZIP                      |  |
| 14. I hereby certify that the information supplied with this fifing 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes  by:TCF |   |                                  |  |
| SIGNATURE: Havlan R.Crow, Pres. 4-17-00 (214) 661-8000  |   |                                  |  |