

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90225 005 ***150.00

DOCUMENT # F00000000993	
1. Entity Name HFF-GP, INC.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3424 Peachtree Road, NE		3. Mailing Address 3424 Peachtree Road, NE	
Suite, Apt. #, etc. Suite 800		Suite, Apt. #, etc. Suite 800	
City & State Atlanta, GA		City & State Atlanta, GA	
Zip 30326	Country USA	Zip 30326	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-2943055		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name CT Corporation System	
	Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road	
	City Plantation	FL Zip Code 33324

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when renewing)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Thomas A. McKean 3424 Peachtree Rd., NE, #800 Atlanta, GA 30326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD E. Nelson Mills 3424 Peachtree Rd., NE, #800 Atlanta, GA 30326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS Sally Ann Seebode 3424 Peachtree Rd., NE, #800 Atlanta, GA 30326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS Debbie J. Newmark 3424 Peachtree Rd., NE, #800 Atlanta, GA 30326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Brent E. Johnson 3424 Peachtree Rd., NE, #800 Atlanta, GA 30326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 112.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Debbie J. Newmark **Debbie J. Newmark** **04/02/03** **404-848-8600**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #