

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004043

FILED
Mar 23, 2009
Secretary of State

Entity Name: ULI-THE URBAN LAND INSTITUTE (INCORPORATED)

Current Principal Place of Business:

1025 THOMAS JEFFERSON ST. NW, SUITE 500W
WASHINGTON, DC 20007

New Principal Place of Business:

Current Mailing Address:

1025 THOMAS JEFFERSON ST. NW, SUITE 500W
WASHINGTON, DC 20007

New Mailing Address:

FEI Number: 53-0159845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, CARLA
2401 EAST ATLANTIC BLVD., SUITE 400
POMPANO BEACH, FL 330625243 US

Name and Address of New 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:

03/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MANSFIELD, TODD W
Address: 6714 HONORS COURT
City-St-Zip: CHARLOTTE, NC 28210

Title: P () Delete
Name: ROSAN, RICHARD M
Address: 4607 CONNECTICUT AVE NW, APT 519
City-St-Zip: WASHINGTON, DC 20008

Title: CFO () Delete
Name: TERSECK, MICHAEL
Address: 15306 JORDANS JOURNEY DR
City-St-Zip: CENTREVILLE, VA 20120

Title: S () Delete
Name: BROWN, JOSEPH E
Address: 466 VALLEJO STREET
City-St-Zip: SAN FRANCISCO, CA 94133

Title: T () Delete
Name: THURBER, LYNN
Address: 200 E RANDOLPH DRIVE SUITE4300
City-St-Zip: CHICAGO, IL 60601

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL TERSECK

CFO

03/23/2009

Electronic Signature of Signing Officer or Director

Date