

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90193 039 \*\*\*150.00

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04192007 Chg-P CR2E034 (12/06)

<b>DOCUMENT # F93000002223</b> 1. Entity Name TRIZEC PROPERTIES, INC.					
Principal Place of Business <del>C/O TAX DEPARTMENT</del> <del>10 S RIVERSIDE PLAZA, SUITE 1100</del> <del>CHICAGO, IL 60606 US</del>			Mailing Address <del>C/O TAX DEPARTMENT</del> <del>10 S RIVERSIDE PLAZA, SUITE 1100</del> <del>CHICAGO, IL 60606 US</del>		
2. Principal Place of Business - No P.O. Box # <b>c/o Legal Dept.; 3 WFC - 200 Vesey St.</b>		3. Mailing Address <b>c/o Legal Dept.</b> <b>St. 3 WFC - 200 Vesey St.,</b>		4. FEI Number <b>33-0387846</b>  5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Suite, Apt. #, etc. <b>11th Floor</b>		Suite, Apt. #, etc. <b>11th Floor</b>			
City & State <b>New York, NY</b>		City & State <b>New York, NY</b>			
Zip <b>10281</b>		Zip <b>10281</b>			
6. Name and Address of Current Registered Agent  <b>THE PRENTICE-HALL CORPORATION SYSTEM INC.</b> <b>1201 HAYS STREET</b> <b>SUITE 105</b> <b>TALLAHASSEE, FL 32301</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CALLAHAN, TIMOTHY H 10 S RIVERSIDE PLAZA, SUITE 1100 CHICAGO, IL 60606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Richard B. Clark 3 WFC - 200 Vesey St., 11th Floor New York, NY 10281	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO COLLERAN, MICHAEL C 10 S RIVERSIDE PLAZA, SUITE 1100 CHICAGO, IL 60606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP/CFO Bryan Davis 3 WFC - 200 Vesey St., 11th Flr. New York, NY 10281	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS JADWIN, TED R 10 S RIVERSIDE PLAZA, SUITE 1100 CHICAGO, IL 60606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP/S Kathleen G. Kane 3 WFC - 200 Vesey St., 11th Floor New York, NY 10281	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAKER, ROGER L 10 S RIVERSIDE PLAZA, SUITE 1100 CHICAGO, IL 60606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Robert M. Jambois 3 WFC - 200 Vesey St., 11th Flr. New York, NY 10281	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV TRESHAM, WILLIAM R 10 S RIVERSIDE PLAZA, SUITE 1100 CHICAGO, IL 60606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/COO Dennis H. Friedrich 3 WFC - 200 Vesey St., 11th Flr. New York, NY 10281	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV LIPSON, BRIAN K 10 S RIVERSIDE PLAZA, SUITE 1100 CHICAGO, IL 60606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP/T G. Mark Brown 3 WFC - 200 Vesey St., 11th Flr. New York, NY 10281	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Robert M. Jambois, Vice President</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>4/20/07</u> 312-798-6000 <small>Daytime Phone #</small>		