2002 UNIFORM BUSINESS REPORT (UBR)

F93000004334 **DOCUMENT #** 1. Entity Name

COLONIAL PROPERTIES SERVICES, INC.



2101 SIXTH AVE. NORTH ENERGEN PLAZA, STE. 750 BIRMINGHAM AL 35202		Mailing Address 2101 SIXTH AVE. NORTH ENERGEN PLAZA. STE. 750 BIRMINGHAM AL 35202					
2. Principal F	Place of Business	3. Mailing Address			1 4 0 0 3 1 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	attı antıl bigen itide	# # #
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FE	63-1009/66		plied For t Applicable
Zip	Country	Zip	Country	5. Ce	ertificate of Status Desired	\$8.75 Add	itional
	6. Name and Address of Current Re			7. Na	me and Address of New Register		
CORPORATION SERVICE COMPANY 1201 HAYS ST.			Name Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301							
			City	.,	F	Zip Code	,
8. The above	named entity submits this statement for t		egistered office or regis			'E	
			FEE IS \$150.00 Fee will be \$550.00 to Department of S	J	Election Campaign Financing Trust Fund Contribution.) May Be to Fees
11.	OFFICERS AND DI		12.	ADDI	TIONS/CHANGES TO OFFICERS A	ND DIRECTORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LOWDER, THOMAS H 2101 SIXTH AVENUE NORTH BIRMINGHAM AL 35202	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOWDER, JAMES K 2000 INTERSTATE PKWY., STE. 40 MONTGOMERY AL 36109	Delete 0	TITLE TO NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOWDER, ROBERT E ONE COMMERCE ST. MONTGOMERY AL 36104	☐ Delete	TITLE NAME STREET-ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP NELSON, HOWARD B JR. 2101 SIXTH AVENUE NORTH, STE. BIRMINGHAM AL 35202	☐ Delete 750	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP HUGHEY, JOHN N 2101 SIXTH AVENUE NORTH, STE. BIRMINGHAM AL 35202	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with thi	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			•	Addition

of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Molecul Quired SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #