2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 20, 2002 8:00 am Secretary of State DOCUMENT # F94000005564 1. Entity Name 05-20-2002 90105 048 ***150.00 PROLOGIS IV. INC. Principal Place of Business Mailing Address 14100 E 35TH PLACE 14100 E 35TH PLACE AURORA CO 80011 ATTN: TAX DEPTARTMENT/ KATIE HARDMAN AURORA CO 80011 US 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 74-2722998 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE (9/01)☐ Delete Change Addition NAME KEISER, JR., M. GORDON NAME STREET ADDRESS 14100 E 35TH PLACE CR2E034 STREET ADDRESS CITY-ST-ZIP AURORA CO 80011 CITY-ST-ZIP TITLE ☐ Delete SVPC TITLE ☐ Change Addition NAME NAME L'ANDS, L'UKE A STREET ADDRESS STREET ADDRESS 7777 MARKET CENTER AVE CITY-ST-ZIP CITY-ST-ZIP EL PASO TX 79912 TITLE Delete SVPS JITH F ☐ Change Addition NAME NEKRITZ, EDWARD S NAME STREET ADDRESS 14100 E 35TH PLACE STREET ADDRESS CITY-ST-ZIP AURORA CO 80011 CITY-ST-ZIP TITLE ☐ Defete DP TITLE Change Addition BROOKSHER, K. DANE NAME STREET ADDRESS 14100 E 35TH PLACE STREET ADDRESS CITY-ST-ZIP AURORA CO 80011 CITY-ST-ZIP SVP ☐ Delete Change ☐ Addition FALLON, FRANK H NAME STREET ADDRESS 2791 PETERSON PLACE STREET ADDRESS CITY-ST-ZIP NORCROSS GA 30071 CITY-ST-ZIP TITLE MD Delete TITLE ☐ Change ☐ Addition NAME SEIPLE, JR., JOHN W NAME

13. I hereby certify that the information supplied with this filing 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 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 trustered in powered 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

14100 E 35TH PLACE

AURORA CO 80011

STREET ADDRESS

CITY-ST-ZIP

REQUIRCATALeen N. Hardman