

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2000 8:00 am
Secretary of State

05-13-2000 90007 012 ***150.00

DOCUMENT # F94000005566

1. Entity Name

PROLOGIS DEVELOPMENT SERVICES INCORPORATED

Principal Place of Business

Mailing Address

14100 E 35TH PLACE
 AURORA CO 80011
 US

7777 MARKET CENTER AVENUE
 EL PASO TX 79912-8411
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

74-2719602

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **CP**
 STREET ADDRESS **BROOKSHER, K DANE**
 CITY-ST-ZIP **14100 E 35TH PLACE**
AURORA CO

TITLE Change Addition
 NAME **Chairman**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D**
 STREET ADDRESS **WATTLES, THOMAS G**
 CITY-ST-ZIP **125 LINCOLN AVE**
SANTA FE NM 87501

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **V**
 STREET ADDRESS **MADSEN, DONALD W**
 CITY-ST-ZIP **14100 E 35TH PLACE**
AURORA CO 80011

TITLE Change Addition
 NAME **SVP & Controller**
 STREET ADDRESS **Edward F. Long**
 CITY-ST-ZIP **7777 Market Center Avenue**
El Paso, TX 79912

TITLE Delete
 NAME **V**
 STREET ADDRESS **GOTTLIEB, JEFFREY S.**
 CITY-ST-ZIP **7777 MARKET CENTER AVENUE**
EL PASO TX

TITLE Change Addition
 NAME **Assistant Secretary**
 STREET ADDRESS **Leana L. Robertson**
 CITY-ST-ZIP **14100 E. 35th Place**
ARuora, CO 80011

TITLE Delete
 NAME **D**
 STREET ADDRESS **BLANKENSHIP, C RONALD**
 CITY-ST-ZIP **125 LINCOLN AVENUE**
SANTA FE NM

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D**
 STREET ADDRESS **DRESSLER, DAVID C**
 CITY-ST-ZIP **2100 RIVEREDGE PKWY 9 FLOOR**
SANTA FE NM

TITLE Change Addition
 NAME
 STREET ADDRESS **2100 RiverEdge Parkway, 9th Floor**
 CITY-ST-ZIP **Atlanta, GA 30328**

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 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: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President (915)877-3900
 Date Daytime Phone #

CR2E034 (9/99)