

# 2000 UNIFORM BUSINESS REPORT (UBR)

0577388

DOCUMENT # F94000006601

1. Entity Name

CB RICHARD ELLIS CORPORATE FACILITIES MANAGEMENT

FILED

00 MAR 28 AM 9:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

5000 BIRCH ST.  
STE. 6000  
NEWPORT BEACH CA 92660

533 S. FREMONT AVE.  
LEGAL DEPARTMENT  
LOS ANGELES CA 90071-1706  
US

2. Principal Place of Business

3. Mailing Address

333 S. Beaudry Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

9th Floor

City & State

City & State

Los Angeles, CA

4. FEI Number

33-0582062

Applied For

Not Applicable

Zip

Country

Zip

90017

Country

USA

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

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DC  
LYONS, EDWARD R  
6300 FOREST PARK ROAD, SUITE 1139  
DALLAS TX

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

700003196317--9  
-04/05/00--01014--022  
\*\*\*\*\*531.25 \*\*\*\*\*150.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
DAVIS, JOHN W  
3 EMBARCADERO CENTER, SUITE 980  
SAN FRANCISCO CA

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AS  
ROTH, HERBERT L  
533 S. FREMONT AVENUE  
LOS ANGELES CA 90071

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☒ Change ☐ Addition

333 S. Beaudry Avenue 9th Floor  
Los Angeles, CA 90017

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DCFO  
MCMILLEN, LYNDIA S  
5000 BIRCH ST., STE. 6000  
NEWPORT BEACH CA 92660

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
TSUJIMOTO, TRUDE A  
533 S. FREMONT AVENUE  
LOS ANGELES CA 90071

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

Secretary  
Walter V. Stafford  
353 Sacramento Street  
San Francisco, CA 94111

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☒ Addition

Assistant Secretary  
Kelsa L. Jones  
333 S. Beaudry Avenue, 9th Floor  
Los Angeles, CA 90017

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

Kelsa L. Jones 3/13/00 213-613-3239

Date

Daytime Phone #

FILED