

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 02, 1999 8:00am  
Secretary of State

02-02-1999 90029 008 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000003502

1. Corporation Name

GLENBOROUGH REALTY TRUST INCORPORATED

Principal Place of Business

400 SOUTH EL CAMINO REAL SUITE #1100  
SAN MATEO CA 94402-1708

Mailing Address

400 SOUTH EL CAMINO REAL SUITE #1100  
SAN MATEO CA 94402-1708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/10/1996

4. FEI Number

94-3211970

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23. City & State

23

27. City & State

27

Zip

Country

24

25

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CEO ☐ DELETE

NAME BATINOVICH, ROBERT  
STREET ADDRESS 441 ROEHAMPTON ROAD  
CITY-ST-ZIP HILLSBOROUGH CA 94010

1.1 TITLE

04-3211970

☐ Change

☐ Addition

NAME BATINOVICH, ANDREW  
STREET ADDRESS 1201 MARLBOROUGH ROAD  
CITY-ST-ZIP HILLSBOROUGH CA 94010

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE COOD ☐ DELETE

NAME BATINOVICH, ANDREW  
STREET ADDRESS 1201 MARLBOROUGH ROAD  
CITY-ST-ZIP HILLSBOROUGH CA 94010

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE EVP ☐ DELETE

NAME BOYLE, SANDRA L  
STREET ADDRESS 431 HURLINGHAM  
CITY-ST-ZIP SAN MATEO CA 94402

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE SVPT ☐ DELETE

NAME GARNICK, TERRI  
STREET ADDRESS 421 PARROTT DRIVE  
CITY-ST-ZIP SAN MATEO CA 94402

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE SGS ☐ DELETE

NAME AUSTIN, FRANK E  
STREET ADDRESS 180 E. CREEK DRIVE  
CITY-ST-ZIP MENLO PARK CA 94025

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE V ☐ DELETE

NAME CHENG, ANNA  
STREET ADDRESS 1232 ALAMEDA DE LAS PULGAS  
CITY-ST-ZIP REDWOOD CITY CA 94061

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frank E. Austin, Secretary

1/13/99

(650) 343-9300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)