

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003560

FILED
Apr 19, 2010
Secretary of State

Entity Name: EQUITY OFFICE PROPERTIES MANAGEMENT CORP.

Current Principal Place of Business:

2 N. RIVERSIDE PLAZA
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

C/O ANN M. SCHNEIDER
2 N. RIVERSIDE PLAZA
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-4163462 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEXIS DOCUMENT SERVICES INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV
Name: COHEN, FRANK
Address: 345 PARK AVENUE
City-St-Zip: NEW YORK, NY 10154

Title: AS
Name: SCHNEIDER, ANN M
Address: 2 N. RIVERSIDE PLAZA
City-St-Zip: CHICAGO, IL 60606

Title: DVT
Name: ALDRICH, PATRICK
Address: 2 N. RIVERSIDE PLAZA
City-St-Zip: CHICAGO, IL 60606

Title: DSVP
Name: HEISTER, KURT
Address: 2 N RIVERSIDE PLAZA
City-St-Zip: CHICAGO, IL 60606

Title: DP
Name: PEATROSS, CHRISTOPHER
Address: 2655 CAMPUS DRIVE
City-St-Zip: SAN MATEO, CA 94403

Title: VAS
Name: KORITZ, MATTHEW H
Address: 2 N RIVERSIDE PLAZA
City-St-Zip: CHICAGO, IL 60606

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANN M. SCHNEIDER

AS

04/19/2010

Electronic Signature of Signing Officer or Director

Date