

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M00000001159

1. Entity Name

ROUSE-TAMPA BAY, LLC

FILED

01 JUN 28 AM 8:47

Principal Place of Business

Mailing Address

% OFFICE OF GENERAL COUNSEL ROUSE COMPANY  
10275 LITTLE PATUXENT PARKWAY  
COLUMBIA MD 21044

% OFFICE OF GENERAL COUNSEL ROUSE COMPANY  
10275 LITTLE PATUXENT PARKWAY  
COLUMBIA MD 21044

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

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

52-2248854

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

300004476713--2  
-07/16/01--01023--001  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE President  
NAME Anthony W. Deering  
STREET ADDRESS 10275 Little Patuxent Pkwy  
CITY-ST-ZIP Columbia, MD 21044 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE Treasurer  
NAME Patricia H. Dayton  
STREET ADDRESS 10275 Little Patuxent Pkwy  
CITY-ST-ZIP Columbia, MD 21044 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE Secretary  
NAME Gordon H. Glenn  
STREET ADDRESS 10275 Little Patuxent Pkwy  
CITY-ST-ZIP Columbia, MD 21044 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP  
NAME Elizabeth A. Hullinger  
STREET ADDRESS 10275 Little Patuxent Pkwy  
CITY-ST-ZIP Columbia, MD 21044 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Elizabeth A. Hullinger

4/23/01

410-992-6000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)

0027199 AF