

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 05, 2002 8:00 am**  
**Secretary of State**

01-28-2002 90018 004 \*\*\*\*\*55.00

**DOCUMENT # M01000000072**

1. Entity Name

**MISSION BAY SHOPPING CENTER, LLC**

Principal Place of Business

C/O INVESCO, INC.  
 ONE LINCOLN CENTRE, STE. 700  
 DALLAS TX 75240

Mailing Address

C/O INVESCO, INC.  
 ONE LINCOLN CENTRE, STE. 700  
 DALLAS TX 75240

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**APPLIED FOR**

Applied For

**75-2913735**

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

**CORP/DIRECT. AGENTS**  
**103 N. MERIDIAN ST., LOWER LEVEL**  
**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

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**Due By May 1, 2002**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE	<b>INVESTCO Realty Advisors, P. Division</b>	<input type="checkbox"/> Delete
NAME	<b>of INVESCO Institutional (N.A.) Inc.</b>	
STREET ADDRESS	<b>5400-LBJ Fwy. Suite 700</b>	
CITY-ST-ZIP	<b>Dallas, Texas 75240</b>	
TITLE	<b>Michael Kirby</b>	<input type="checkbox"/> Delete
NAME	<b>Vice President - Secretary</b>	
STREET ADDRESS	<b>5400-LBJ Freeway Suite 700</b>	
CITY-ST-ZIP	<b>Dallas, Tx. 75240</b>	
TITLE	<b>Kevin Johnson</b>	<input type="checkbox"/> Delete
NAME	<b>Vice President - Secretary</b>	
STREET ADDRESS	<b>5400-LBJ Freeway Suite 700</b>	
CITY-ST-ZIP	<b>Dallas, Tx. 75240</b>	
TITLE	<b>Ron Ragsdale</b>	<input type="checkbox"/> Delete
NAME	<b>Vice President / Secretary</b>	
STREET ADDRESS	<b>5400-LBJ Freeway Suite 700</b>	
CITY-ST-ZIP	<b>Dallas, Tx. 75240</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

**Michael Kirby**  
**Vice President**

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

**1/9/02**  
 Date

Daytime Phone #

CR2E083 (9/01)