LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT/(UBR)**

SIGNATURE: James C. Martin, Vi

DOCUMENT # M02000003452

1. Entity Name

PROLOGIS-MACQUARIE FLORIDA I LLC



FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91003 011 ****50.00

oplogis

303-375-9292

James C. Martin, Vice President

	DO N	IOT WF	RITE IN THIS	SPAC	E			
2. Principal Place of Business 14100 East 35th Place			3. Mailing Addres	s				
Suite, Apt. #, etc.			Suite, Apt. #, et	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State			City & State		<u>, </u>	4. FEI Number	Applied For	
<u>Aurora</u> Zip 800 11			Zip	Country		45-0494441 5. Certificate of Status Desired	Not Applicable \$5.00 Additional Fee Required	
				1		7. Name and Address of Current Reg		
			- White	Name Con		poration Service Company		
DO NOT WI IN THIS SP				100 100 100 100 100 100 100 100 100 100	Street Address (P.O. Box Number is Not Acceptable)			
			SPACE		1201 Hays Street			
					City Talla	hassee	FL ^{zip} Code 32301	
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE -	Signature, typed	or printed name of regit	stered agent and title if applicable.				DATE	
FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1								
9. MANAGING MEMBERS/MANAGERS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP		gis East 35th a, CO 800		A PROPERTY AND	T ADDRESS ST-ZIP	MALE STATE OF THE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				##Tistings/William				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				。但是他们的	T ADDRESS ST 2IP.	DO NOT W	RITE	
title Name Street address City-St-Zip				- The state of the	T ADDRESS ST- ZIP	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITLE NAME STREE CITY-	T ADDRESS ST-ZIP			
TITLE NAME STREET ADDRESS CITY-SJ-ZIP				9	T ADDRESS ST-ZIP			
indicated (on this repo	rt is true and accu	plied with this filing does not quarate and that my signature sha or trustee empowered to execu	all have the same	legal effect as if m	ction 119.07(3)(i), Florida Statutes. I fur ade under oath; that I am a managing er 608, Florida Statytes.	ther certify that the information member or manager of the	