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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 29, 1999 8:00am **Secretary of State**

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DOCUMENT # P38759

GLENBOROUGH CORPORATION

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| Principal Place of Business | | Ma | Mailing Address | | | | 1 (08)(00) (0 | a 11461 lähti 18881 Allisa. | FALL DEALT BIBST BIBST BIBIT | A1411 D1031 1181 | |
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| SAN MATEO CA 94402-1708 | | _ | SAN MATEO CA 94402-1708 | | | | DO NOT WRITE IN THIS SPACE | | | | |
| US | • | US | | | | | 3. Date Incorporation | | • | | |
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| - ' | Place of Business | 2a. | Mailing Address | | | | 4. FEI Number | • | | plied For | - 1 |
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| Suite, Apt. | . #, etc. | | Suite, Apt. #, etc. | | | | 5. Certificate of St. | | □ \$8.75 <i>/</i> | | ` |
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| ─ ' | itė | <u> </u> | City & State | | | | 6. Election Campa | | \$5.00 | | |
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| | · | 29 | Г | ···· | шу | | 8. This corporation | | year Intangible | □No . | |
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| | 9. Name and Address on Current | | resen Agent | | B1 N | Name | 10. Name and Add | mess of New Keg | istered Agent | | ┨ |
| C.T | CORPORATION SYSTEM | • | | . [| | 7401110 | | | | | |
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| OUT office or | t to the provisions of Sections 607.0502 registered agent, or both, in the State of | of Florid: | a "Such channe was au | thorized I | hv the | named corpo e corporatio | oration submits this sta in's board of directors. | atement for the pur I hereby accept th | pose of changing its le appointment as re | registered aistered | |
| SA Lagent! La | am familiar with, and accept the obligat | tions ôf; | Section 607 0505, Flori | da Statut | es. | | | | | • | İ |
| US | | US | | | | | | | | | |
| US SIGNATURE | | | | | | | | | | | |
| | Signature, typed or printed name of registered agent | | | _ | gent sig | ignature required | when reinstating)/ , (**) | | DATE | | - 5 |
| 12. | Signature, typed or printed name of registered agent OFFICERS ANI | | CTORS | 13. | | ignature required | ADDITIONS/CHA | ANGES TO OFFIC | ERS AND DIRECTO | | |
| 12. | Signature, typed or printed name of registered agent OFFICERS ANI | | | 13. 1.1 TITL | E | ignature required | | ANGES TO OFFIC | | RS IN 12 | |
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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 of true and exercise to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or page attachment an address, with all other like empowered.

Robert E. Bailey, Secretary 1/12/99 (650) 343-9300