2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9300084669 1. Entity Name CLARKSON PROPERTY GROUP, INC.						APPROVED AND FILED					
CLARKSON PROPERTY GROUP, INC.						nn ()(CT 12 AMI	- 0: 59			
Principal Place of 3100 UNIVERSITY SUITE 200	' BLVD. S	Mailing Address ATTN: GERALDINE G. BROWN 3100 UNIVERSITY BLVD. S., STE. 200				SECRETARY OF STATE TALLAHASSEE, FLORIDA					
JACKSONVILLE FL 32216 JACKSONVILLE FL 32216											
2. Principal Pla	ce of Business	3. Mailing Address									
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.					DO NOT WRITE	IN THIS SPAC		ied For	
City & State		City & State			4. FE	I Number	59-3217822 		Not A	Applicable	
Zíp	Country	Zip Coun		try	5. Certificate of Status Desired Fee Require 7. Name and Address of New Registered Agent				onai		
6. Name and Address of Current Registered Agent Name						ame and Ad	dress of New Ne	JISTEFEO AGE	<u></u>		
BROWN, GERALDINE G 3100 UNIVERSITY BLVD. S					Street Address (P.O. Box Number is Not Acceptable)						
SUITE JACK	E 200 Sonville FL 32216		City				FL	Zip Code			
							- the Chata of Flori				
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											
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. Will be 3							on Campaign Fina Fund Contribution		\$5.00 Added 1	May Be to Fees	
(See criteria on back)					f State	DITIONS (C	HANGES TO OFFI	CERS AND DI	RECTORS	IN 11	
11.	OFFICERS AND	DIRECTORS Delete	12.			-] Change	☐ Addition	
NAME	CLARKSON, CHARLES A	TE 005	NAM STR	AE FET ADDRESS		61	00003 00003	/0001	いみつべてい	ן וטע	
STREET ADDRESS CITY-ST-ZIP	3100 UNIVERSITY BLVD. S., S JACKSONVILLE FL 32216	IE 235	CIT	Y-ST-ZIP			***	750.00	****7		
TITLE	VD	☐ Delete	TIT!	E A		ATE	Mean	_] Change	☐ Addition }	
NAME STREET ADDRESS CITY-ST-ZIP	WEATHERBY, JOHN F 3100 UNIVERSITY BLVD. S. STE 235			EET ADDRESS Y-ST-ZIP		- 5	-11/01 MENT	451	12)		
TITLE	JACKSONVILLE FL 32216 DV	☐ Delete	TIT					-	Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	CLARKSON, ROBERT W 3100 UNIVERSITY BLVD. S. S JACKSONVILLE FL 32216	ME REET ADDRESS Y-ST-ZIP					. <u>.</u>				
TITLE	ST	☐ Delete	TIT		· · · · · · · · · · · · · · · · · · ·] Change	Addition \	
NAME STREET ADDRESS	CLARKSON, PATRICIA H 3100 UNIVERSITY BLVD. S., S	STE 200		REET ADDRESS							
CITY-ST-ZIP	JACKSONVILLE FL 32216	☐ Delete	Cil	Y-ST-ZIP					Change	Addition	
TITLE NAME		La Deide	NA.	ME						ļ	
STREET ADDRESS CITY-ST-ZIP				REET ADDRESS IY-ST-ZIP							
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NAME STREET ADDRESS			ŞT	REET ADDRESS							
13. I hereby	certify that the information supplied v	vith this filing does not qualify t is true and accurate and tha	for the ex	ry-st-zip kemption state lature shall ha	ed in Section we the same	119.07(3)(i) tegal effect	, Florida Statutes. as if made under	I further certifoath; that I am	y that the in an officer Block 11 or	nformation or director Block 12 if	
13. 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 or supplemental 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 indicated on this report or supplemental 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 indicated on this report is report or supplemental 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 indicated on this report or supplemental 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 indicated on this report or supplemental 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 indicated on this report or supplemental 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 indicated on this report or supplemental 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 indicated on this report or supplemental 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 indicated on this report of the corporation or the receiver or trustee empowered to execute this report as report of the corporation or the receiver or trustee empowered to execute this report as report of the corporation or the receiver or trustee empowered to execute this report of the corporation or the receiver or trustee empowered to execute this report of the corporation or the receiver of the c											
SIGNATURE: TO THE PROPERTY OF SOME PROPERTY PROP											