

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003319

Entity Name: UDR, INC.**Current Principal Place of Business:**1745 SHEA CENTER DRIVE
SUITE 200
HIGHLANDS RANCH, CO 80129**Current Mailing Address:**1745 SHEA CENTER DRIVE
SUITE 200
HIGHLANDS RANCH, CO 80129**FEI Number:** 54-0857512**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PCEO
Name	TOOMEY, THOMAS W
Address	1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip:	HIGHLANDS RANCH CO 80129

Title	AS
Name	GREEN, LESLIE E
Address	1745 SHEA CENTER DRIVE, SUITE 200
City-State-Zip:	HIGHLANDS RANCH CO 80129

Title	SVP, COO
Name	DAVIS, JERRY A
Address	1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip:	HIGHLANDS RANCH CO 80129

Title	SEVS
Name	TROUPE, WARREN L
Address	1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip:	HIGHLANDS RANCH CO 80129

Title	VP, TREASURER
Name	O'SHIELDS, WILLIAM T III
Address	1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip:	HIGHLANDS RANCH CO 80129

Title	SVP, CFO
Name	HERZOG, THOMAS M.
Address	1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip:	HIGHLANDS RANCH CO 80129

Title	VP, TAX
Name	LATY, ROGER
Address	1745 SHEA CENTER DRIVE SUITE 200
City-State-Zip:	HIGHLANDS RANCH CO 80129

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LESLIE E. GREEN**ASSISTANT SECRETARY** 04/14/2015_____
Electronic Signature of Signing Officer/Director Detail_____
Date