

**2017 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F06000004886

**FILED**  
**Feb 07, 2017**  
**Secretary of State**  
**CC5338800988**

**Entity Name:** PROLOGIS LOGISTICS SERVICES INCORPORATED

**Current Principal Place of Business:**

4545 AIRPORT WAY  
DENVER, CO 80239

**Current Mailing Address:**

ATTN: LEGAL DEPT.  
4545 AIRPORT WAY  
DENVER, CO 80239 US

**FEI Number:** 74-2827271

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 DIR  
Name NEKRITZ, EDWARD  
Address 4545 AIRPORT WAY  
City-State-Zip: DENVER CO 80239

Title MD  
Name BLAIR, MICHAEL T  
Address 4545 AIRPORT WAY  
City-State-Zip: DENVER CO 80239

Title CFO  
Name OLINGER, THOMAS S  
Address PIER ONE, BAY ONE  
City-State-Zip: SAN FRANCISCO CA 94111

Title SEC  
Name NEKRITZ, EDWARD S  
Address 4545 AIRPORT WAY  
City-State-Zip: DENVER CO 80239

Title VP  
Name CROVO, PETER  
Address 8355 NW 12TH STREET  
SUITE 108  
City-State-Zip: DORAL FL 33126

Title VP  
Name MORGAN, JOHN R.  
Address 3475 PIEDMONT ROAD NE  
SUITE 650  
City-State-Zip: ATLANTA GA 30305

Title VP  
Name GLAZIER, DENVER  
Address 8355 NW 12TH STREET  
SUITE 108  
City-State-Zip: DORAL FL 33126

Title ASST. SECRETARY  
Name POLGAR, JESSICA  
Address 4545 AIRPORT WAY  
City-State-Zip: DENVER CO 80239

**Continues on page 2**

*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:** EDWARD S. NEKRITZ

**SECRETARY**

**02/07/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name DEDEKIND, BRENDON  
Address 300 S. ORANGE AVENUE  
SUITE #1110  
City-State-Zip: ORLANDO FL 32801