LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2004 8:00 am
Secretary of State
04-29-2004 90069 034 ****50.00

24059367

DOCUMENT # M03000002361

1. Entity Name

KB HOME Fort Myers LLC

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
12525 NEW BRITTANY BLVD.	10990 WILSHIRE BLVD.
Suite, Apt. #, etc.: BLDG. #28	Suite, Apt. #, etc.: 7TH FLR., TAX DEPT.
City & State: FORT MYERS, FL	City & State: LOS ANGELES, CA
Zip: 33907 Country: USA	Zip: 90024 Country: USA

4. FEI Number: 77-0605541 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable): 1201 HAYS STREET

City: TALLAHASSEE **FL** Zip Code: 32301-2525

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

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	MEMBER KB HOME FLORIDA LLC 10990 WILSHIRE BLVD., 7TH FLR. LOS ANGELES, CA 90024
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT CHARLES COOK 12525 NEW BRITTANY BLVD., BLDG.#28 FORT MYERS, FL 33907
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EXECUTIVE VICE PRESIDENT JEFFREY T. MEZGER VICE PRESIDENT/TREASURER KELLY M. ALLRED
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SENIOR VICE PRESIDENT, LAND SAM ROSS 12525 NEW BRITTANY BLVD., BLDG.#28 FORT MYERS, FL 33907
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT/TREASURER KELLY M. ALLRED 10990 WILSHIRE BLVD., 7TH FLR. LOS ANGELES, CA 90024
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASSISTANT SECRETARY CORY F. COHEN 10990 WILSHIRE BLVD., 7TH FLR. LOS ANGELES, CA 90024

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**DO NOT WRITE IN THIS SPACE**
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

CR2E083B (12/02)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CORY F. COHEN 04/16/04 (310) 231-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #