

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 100745

FILED
Mar 18, 2011
Secretary of State

Entity Name: BOVIS LEND LEASE, INC.

Current Principal Place of Business:

200 PARK AVENUE
9TH FLOOR
NEW YORK, NY 10166 US

New Principal Place of Business:

Current Mailing Address:

200 PARK AVENUE
9TH FLOOR
NEW YORK, NY 10166 US

New Mailing Address:

FEI Number: 56-0315630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: CONNOR, DALE JAMES
Address: 200 PARK AVE., 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: VP
Name: GAIL, ADAMS
Address: 200 PARK AVE., 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: CFO
Name: J BRAD, ROBINSON
Address: 200 PARK AVE., 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: D
Name: JEFFREY, ARFSTEN
Address: 200 PARK AVE., 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: SECY
Name: CHRISTENSEN-SJOGREN, LINDA
Address: 200 PARK AVE., 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: D
Name: ROBINSON, BRAD
Address: 200 PARK AVE., 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

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: MANDELINE HENDRICKS

POA

03/18/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date