

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 100745

Entity Name: LENDLEASE (US) CONSTRUCTION INC.**Current Principal Place of Business:**200 PARK AVENUE
9TH FLOOR
NEW YORK, NY 10166**Current Mailing Address:**200 PARK AVENUE
9TH FLOOR
NEW YORK, NY 10166 US**FEI Number:** 56-0315630**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O CT 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 DIRECTOR
Name WOOLCOCK, MURRAY
Address 200 PARK AVENUE
9TH FLOOR
City-State-Zip: NEW YORK NY 10166

Title VP
Name MIZUSHIMA, NORI
Address 200 PARK AVENUE
9TH FLOOR
City-State-Zip: NEW YORK NY 10166

Title PRESIDENT
Name ARFSTEN, JEFFREY L.
Address 200 PARK AVENUE
9TH FLOOR
City-State-Zip: NEW YORK NY 10166

Title SECRETARY
Name GIORDANO, THOMAS V.
Address 200 PARK AVENUE
9TH FLOOR
City-State-Zip: NEW YORK NY 10166

Title TREASURER
Name DONOHOE, JOHN
Address 200 PARK AVENUE
9TH FLOOR
City-State-Zip: NEW YORK NY 10166

Title ASSISTANT SECRETARY
Name DAVIS, KEVIN M.
Address 200 PARK AVENUE
9TH FLOOR
City-State-Zip: NEW YORK NY 10166

Title DIRECTOR
Name WALSH, PAUL
Address 200 PARK AVENUE
9TH FLOOR
City-State-Zip: NEW YORK NY 10166

Title VP
Name COOK, EDWARD R.
Address 2300 YORKMONT ROAD
SUITE 700
City-State-Zip: CHARLOTTE NC 28217

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: KEVIN M. DAVIS**ASSISTANT SECRETARY 04/15/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ARFSTEN, JEFFREY L.
Address	200 PARK AVENUE 9TH FLOOR
City-State-Zip:	NEW YORK NY 10166