

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 100745

Entity Name: LEND LEASE (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:**CT 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, PRESIDENT
Name	ARFSTEN, JEFFREY L.
Address	200 PARK AVENUE 9TH FLOOR
City-State-Zip:	NEW YORK NY 10166

Title	TREASURER
Name	ROBINSON, J. BRAD
Address	2300 YORKMONT ROAD SUITE 700
City-State-Zip:	CHARLOTTE NC 28217

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

Title	DIRECTOR
Name	WOOLCOCK, MURRAY
Address	200 PARK AVENUE 9TH FLOOR
City-State-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: KEVIN M. DAVIS**ASST SECRETARY****04/15/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date