

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 100745

**Entity Name:** LEND LEASE (US) CONSTRUCTION INC.

**FILED**  
**Apr 15, 2015**  
**Secretary of State**  
**CC7744894649**

**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