

**2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F75785

**Entity Name:** TAYLOR MORRISON OF FLORIDA, INC.

**FILED**  
**Oct 30, 2015**  
**Secretary of State**  
**CC4704766018**

**Current Principal Place of Business:**

4900 N. SCOTTSDALE ROAD  
SUITE 2000  
SCOTTSDALE, AZ 85251

**Current Mailing Address:**

4900 N. SCOTTSDALE ROAD  
SUITE 2000  
SCOTTSDALE, AZ 85251 US

**FEI Number: 59-2179728**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC  
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 ASST. SECRETARY  
Name MERRILL, S. TODD  
Address 1211 N. WESTSHORE BLVD  
SUITE 512  
City-State-Zip: TAMPA FL 33607

Title PRESIDENT, DIRECTOR  
Name STEFFENS, LOUIS E.  
Address 1211 N. WESTSHORE BLVD  
SUITE 512  
City-State-Zip: TAMPA FL 33607

Title VP  
Name MILLER, DOUGLAS D.  
Address 1211 N. WESTSHORE BLVD  
SUITE 512  
City-State-Zip: TAMPA FL 33607

Title DIRECTOR, VP  
Name KEMPTON, JOHN STEVEN  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title CFO, VP  
Name CONE, C. DAVID  
Address 4900 N. SCOTTSDALE ROAD  
SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title SECRETARY, VP, GENERAL  
Name SHERMAN, DARRELL C.  
Address 4900 N. SCOTTSDALE ROAD  
SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title ASST. SECRETARY  
Name ESTRADA, CAROLINE G.  
Address 4900 N. SCOTTSDALE ROAD  
SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title VP  
Name LONGENECKER, CAMMIE L.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

**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: CAROLINE G. ESTRADA**

**ASST. SECRETARY**

**10/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name MANSFIELD, MICHAEL E.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - VERTICAL/PURCHASING  
Name WRIGHT, JOHN ASA  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title AUTHORIZED AGENT - LAND  
Name ASHER, JOHN P.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - FINANCE  
Name TER DOEST, ROBERT  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - FINANCE  
Name BRIONES, TRACY  
Address 551 NORTH CATTLEMEN ROAD  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - VERTICAL/PURCHASING  
Name SISTIK, DUANE  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title AUTHORIZED AGENT - LAND  
Name TRUXTON, DAVID  
Address 551 NORTH CATTLEMEN RD., SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - FINANCE  
Name TORRES, LYMARI  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title AUTHORIZED AGENT - FINANCE  
Name HAIR, ROBERT  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title VP, DIRECTOR  
Name FONTANA, JOSEPH ("JOE")

Title VP  
Name SQUITIERI, ANTHONY ("TONY") J.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title VP  
Name THOMPSON, CAROL  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title VP  
Name TYREE, CHRIS  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title VP  
Name PALKA, RUSSELL  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title VP  
Name BESSE, JASON  
Address 551 NORTH CATTLEMEN RD., SUITE  
200  
City-State-Zip: SARASOTA FL 34232

Title VP  
Name TILTON, NANCY THERESA  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title VP  
Name ATWOOD, STEPHEN M.  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title VP  
Name GONZALEZ, ROLANDO P.  
Address 2600 LAKE LUCIEN DRIVE  
SUITE 350  
City-State-Zip: MAITLAND FL 32779

Title AUTHORIZED AGENT - LAND  
Name DEASON, JEFFREY  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Address 2600 LAKE LUCIEN DRIVE  
SUITE 350

City-State-Zip: MAITLAND FL 32751