# 2014  FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V50944

**Entity Name:** NEWCEN COMMUNITIES, INC.

**Current Principal  Place of Business:**

13300 SW 10TH STREET
PEMBROKE PINES,  FL  33027

**Current Mailing Address:**

1601 FORUM PLACE
SUITE 500
WEST PALM BEACH,  FL  33401  US

**FEI Number:** 65-0346298

**Certificate of Status Desired:**  No

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

MEROLA, MARY JANE
1601 FORUM PLACE
SUITE 500
WEST PALM BEACH, FL  33401  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 | | Title | VP |
| Name | LEVY, H I | | Name | JAIVEN, JACK |
| Address | 1601 FORUM PLACE - SUITE 500 | | Address | 1601 FORUM PLACE - SUITE 500 |
| City-State-Zip: | WEST PALM BEACH  FL  33401 | | City-State-Zip: | WEST PALM BEACH  FL  33401 |
| | | | | |
| Title | DIRECTOR, PRESIDENT | | Title | VP, ASST. SECRETARY |
| Name | LEVY, MARK F | | Name | BECKHART, GEORGE |
| Address | 1601 FORUM PLACE - SUITE 500 | | Address | 13300 SW 10TH STREET |
| City-State-Zip: | WEST PALM BEACH  FL  33401 | | City-State-Zip: | PEMBROKE PINES  FL  33027 |
| | | | | |
| Title | SECRETARY | | Title | VP, TREASURER |
| Name | JAGODA, DENISE | | Name | WELLS, MONICA |
| Address | 1601 FORUM PLACE - SUITE 500 | | Address | 1601 FORUM PLACE - SUITE 500 |
| City-State-Zip: | WEST PALM BEACH  FL  33401 | | City-State-Zip: | WEST PALM BEACH  FL  33401 |
| | | | | |
| Title | DIRECTOR | | | |
| Name | HALPERIN, BARRY | | | |
| Address | 1601 FORUM PLACE SUITE 500 | | | |
| City-State-Zip: | WEST PALM BEACH  FL  33401 | | | |

*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: MONICA WELLS                         VP                         04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date