

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009770

Entity Name: TAYLOR WOODROW COMMUNITIES AT ST. JOHNS FOREST,
L.L.C.**FILED**
Apr 10, 2018
Secretary of State
CC3583851852**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: 02-0637592****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**Authorized Person(s) Detail :**

Title	MANAGING MEMBER
Name	TAYLOR MORRISON OF FLORIDA, INC.
Address	4900 N. SCOTTSDALE ROAD SUITE 2000
City-State-Zip:	SCOTTSDALE AZ 85251
Title	CFO, EXECUTIVE VICE PRESIDENT
Name	CONE, C. DAVID
Address	4900 N. SCOTTSDALE RD, 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	SECRETARY, EXECUTIVE VICE PRESIDENT, CHIEF LEGAL OFFICER
Name	SHERMAN, DARRELL C.
Address	4900 N. SCOTTSDALE ROAD SUITE 2000
City-State-Zip:	SCOTTSDALE AZ 85251

Title	MANAGING MEMBER
Name	TW ACQUISITIONS, INC.
Address	4900 N. SCOTTSDALE ROAD SUITE 2000
City-State-Zip:	SCOTTSDALE AZ 85251
Title	PRESIDENT
Name	KEMPTON, JOHN STEVEN
Address	551 NORTH CATTLEMEN RD. SUITE 200
City-State-Zip:	SARASOTA FL 34232
Title	ASST. SECRETARY
Name	MERRILL, S. TODD
Address	1211 N. WESTSHORE BLVD SUITE 512
City-State-Zip:	TAMPA FL 33607
Title	AUTHORIZED AGENT - VERTICAL/PURCHASING
Name	WRIGHT, JOHN ASA
Address	2600 LAKE LUCIEN DRIVE SUITE 350
City-State-Zip:	MAITLAND FL 32779

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROLINE G. ESTRADA**ASSISTANT SECRETARY 04/10/2018**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date