

2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L02000009770

Entity Name: TAYLOR WOODROW COMMUNITIES AT ST. JOHNS FOREST,
L.L.C.**FILED**
Oct 17, 2013
Secretary of State
CC1379657872**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	VP
Name	CLARK, GREGORY U.
Address	151 SOUTHHALL LANE SUITE 200
City-State-Zip:	MAITLAND FL 32751

Title	VP
Name	MENZEL, JEFFREY
Address	151 SOUTHHALL LANE SUITE 200
City-State-Zip:	MAITLAND FL 32751

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

Title	MANAGING MEMBER
Name	TW ACQUISITIONS, INC.
Address	4900 N. SCOTTSDALE ROAD SUITE 2000
City-State-Zip:	SCOTTSDALE AZ 85251

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

Title	DIRECTOR, VP
Name	JOHNSON, MAURICE B.
Address	151 SOUTHHALL LANE SUITE 200
City-State-Zip:	MAITLAND FL 32751

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

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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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROLINE G. ESTRADA**ASST. SECRETARY****10/17/2013**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date

Authorized Person(s) Detail Continued :

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

Title ASST. TREASURER, VP
Name BOYD, CALVIN R.
Address 4900 N. SCOTTSDALE ROAD
SUITE 2000
City-State-Zip: SCOTTSDALE AZ 85251

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

Title VP
Name WRIGHT, JOHN ASA
Address 151 SOUTHHALL LANE
SUITE 200
City-State-Zip: MAITLAND FL 32751

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

Title TREASURER, VP
Name LEE, SANG P.
Address 151 SOUTHHALL LANE
SUITE 200
City-State-Zip: MAITLAND FL 32751

Title VP
Name WETHOR, STEPHEN J.
Address 4900 N. SCOTTSDALE ROAD
SUITE 2000
City-State-Zip: SCOTTSDALE AZ 85251

Title VP
Name PENNY, CAROL
Address 151 SOUTHHALL LANE
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