

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000007257

Entity Name: CENTEX SERVICE COMPANY, LLC**Current Principal Place of Business:**100 BLOOMFIELD HILLS PARKWAY
SUITE 300
BLOOMFIELD HILLS, MI 48304**Current Mailing Address:**100 BLOOMFIELD HILLS PARKWAY
SUITE 300
BLOOMFIELD HILLS, MI 48304 US**FEI Number:** 75-1588412**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MANAGER, SR VICE PRESIDENT,
 GENERAL COUNSEL AND
 SECRETARY

Name COOK, STEVEN

Address 100 BLOOMFIELD HILLS PARKWAY
 STE 300

City-State-Zip: BLOOMFIELD HILLS MI 48304

Title ASST VICE PRESIDENT

Name ANDERSON, CADE C

Address 100 BLOOMFIELD HILLS PARKWAY
 STE 300

City-State-Zip: BLOOMFIELD HILLS MI 48304

Title MANAGER, VICE PRESIDENT AND
 TREASURER

Name ROBINSON, BRUCE

Address 100 BLOOMFIELD HILLS PARKWAY
 STE 300

City-State-Zip: BLOOMFIELD HILLS MI 48304

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: CADE ANDERSON

ASST VICE PRESIDENT

04/17/2013

Electronic Signature of Signing Authorized Person(s) Detail_____
Date