2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 176987

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

700 N.W. 107 AVENUE

() Delete

MIAMI, FL 33172

DUDLEY, DOYLE

DAVIE, FL 33321

8190 STATE ROAD 84

Entity Name: LENNAR HOMES, INC.

FILED Jan 21, 2003 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
700 N.W. 107 AVENUE MIAMI, FL 33172				700 N.W. 107 AVENUE MIAMI, FL 33172 US		
Current Mailing Address:			New Maili	New Mailing Address:		
700 N.W. 107 AVENUE MIAMI, FL 33172				700 N.W. 107 AVENUE MIAMI, FL 33172 US		
FEI Number: 59-0711505 FEI Number Applied For () FEI Number			lumber Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
MCCAIN, DAVID B ESQ. 700 N.W. 107TH AVENUE MIAMI, FL 33172 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	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CD () I MILLER, LEONA 700 N.W. 107 AV MIAMI, FL 3317	/ENUE	Title: Name: Address: City-St-Zip:	PD (X)	/ENUE	
Title: Name: Address: City-St-Zip:	PD () MILLER, STUAR 700 N.W. 107 AV MIAMI, FL 3317	/ENUE	Title: Name: Address: City-St-Zip:	VD (X) 0 GROSS, BRUCE 700 N.W. 107 AV MIAMI, FL 33172	/ENUE	
Title: Name: Address: City-St-Zip:	VS () MCCAIN, DAVID 700 N.W. 107 AV MIAMI, FL 3317	/ENUE	Title: Name: Address: City-St-Zip:	VS (X)	/ENUE	
Title: Name: Address: City-St-Zip:	VP () I SHEVORY, MAR 8190 STATE RO DAVIE, FL 3332	AD 84	Title: Name: Address: City-St-Zip:	V (X) C SHEVORY, MARI 8190 STATE ROA DAVIE, FL 3332	AD 84	
Title: Name:	VP () PEKOR, ALLAN	Delete J	Title: Name:	V (X) (SEIJAS, ANTHON	Change()Addition NY	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

760 N.W. 107 AVENUE

() Change () Addition

MIAMI, FL 33172 US

SIGNATURE: DAVID B. MCCAIN VS 01/21/2003