2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9700001830 1. Entity Name LEVITT-ANSCA HAGEN RANCH, LTD.						_ SECRET!	JLEO	
					DIVISION OF CURPORATIONS			
Principal Place of Business 7777 GLADES RD . SUITE 410 BOCA RATON FL 33434		Mailing Address 7777 GLADES RD SUITE 410 BOCA RATON FL 33434-4193		OO MAR 17 PM 6: 14				
Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Number	65-0716547	Applied For Not Applicable		
Zip Country		Zip	Cou	ntry	5. Certificate of	f Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent		Name	7. Name and /	ddress of New Registere	d Agent	
LEVITT HAGEN RANCH, INC. / JEFF HOYOS 7777 GLADES RD				Street Address (P.O. Box Number is Not Acceptable)				
SUITE 410 BOCA RATON FL 33434				City FL Zip Code				
IGNATURE O. Capital Co as Shown	Signature, typed or printed name of registered age on tributions on record. \$58,808.00) 10. Amount of Ca in FLORIDA t	apital Contr o date.	2880	800		BLE TO DEPT. OF STATE FOR FEE INFORMATION	
	A GENERAL PARTNEI NOTE: General Partners I	R THAT IS A BUSINESS MAY NOT be changed or	ENTITY No. 1 the form	<i>ilUST BE REGI</i> n; an amendm	STERED AND AG ent must be filed	to change a general p	CE. Partner.	
2.	<u> </u>	IER INFORMATION	13.	•		ADDRESS CHANGES (ONLY	
OCUMENT# AME TREET ADDRESS	GP9800000530 LEVITT-ANSCA HAGEN RANCH PARTNERSHIP 7777 GLADES ROAD, SUITE 410			REET ADDRESS	2000031840620 -03/24/0001122023			
ITY-ST-ZIP	BOCA RATON FL 33434			Y-ST-ZIP	*****500.41 *****500.41			
IAME STREET ADDRESS STY-ST-ZIP		1111 (0(0		Y-ST-ZIP	1/2/	1 ¬		
DOCUMENT#	PR-	411.05	STE	REET ADDRESS	7/	-		
TREET ADDRESS STY - ST - ZIP	- 101	, 68,	CIT	Y-ST-ZIP	· · · · · ·			
OCUMENT # IAME TREET ADDRESS	these.	41		REET ADDRESS				
OCUMENT#		50V·	_	Y-ST-ZIP REET ADDORESS	<u> </u>			
IAME Treet addr _e ess TY-ST-ZIP		•		Y-ST-ZIP				
XOCUMENT#			STE	REET ADORESS			*\	
TREET ADDRESS				Y-ST-ZIP				
indicated	certify that the information supplied v t on this report is true and accurate a ver or trustee empowered to execute	nd that my signature shall ha	ave the sam	ne legal effect as i	Section 119.07(3)(i) if made under oath;	, Florida Statutes. I further that I am a General Partne	certify that the information of the limited partnership or S&J	