2006 FOR PROFIT CORPORATION ANNUAL REPORT

| , ANNUAL REPORT | | | | | | | rh.t. | L - 101/ | | |
|---|---|---------------------|------|--|---|---|-----------------------------|-----------------------|------------------------------|--|
| DOCUMENT # F04000007191 | | | | | , 1 , 1 | SLUME IARY ISION OF CO | RECRATIC | | | |
| Entity Name MERITAGE HOMES OF FLORIDA, INC. | | | | | | | | | | |
| MERTINGE HOMES OF FESTIBILITY. | | | | 100 | | | 06 HAY -9 | AH IU- HO | | |
| Principal Place of Business Mailing Address | | | | | | | | | | |
| 17851 N. 85TH ST. 17851 N. 85TH ST. | | | | | | | | | | |
| SUITE 300 SUITE 300 SCOTTSDALE, AZ 85255 SCOTTSDALE, AZ 85255 | | | 255 | | | | | | | |
| 2. Principal P | 3. Mailing Address | ing Address | | | | | | | | |
| | | Suite, Apt. #, etc. | | | | 8.8111 3 1813 8614 88111 8 \$ 111 | EQUL 4811 1888 BUD 1818 | B | | |
| Suite, Apt. | #, etc. | | | | | 05042006 | Chg-P | CR2E034 (11/05) | ı | |
| City & State | е | City & State | | | | 4. FEI Numbe 20-186 | • | ├ | pplied For lot Applicable | |
| Zip | Country | Zip | Coun | ntry | | | of Status Desired | \$8.75 Ac | Iditional | |
| | 6. Name and Address of Current | Registered Agent | | | | 7. Name and | Address of New Ro | | eu | |
| C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD | | | | Name | | | | | | |
| | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| PLANTATION, FL 33324 | | | | | | | | | | |
| | | | | City | City FL Zip Code | | | | | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | | | | | | |
| | | | | | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 9. Election Campaign Finance | | | | | \$ 5. | 00 May Be | In accordance w | rith s. 607.193(2)(b) | . F.S., the | |
| Due by September 6, 2006 Trust Fund Contribution. | | | | | Add | ed to Fees | corporation did | not receive the prior | notice. | |
| 10. | OFFICERS AND | ·· · _ | 11. | | | ADDITIONS, | CHANGES TO OFFI | CERS AND DIRECTOR | | |
| title Name | PCEO Delete TITL LANDON, JOHN R | | | | | | | Change | Addition | |
| STREET ADDRESS CITY-ST-ZIP | | | | EET ADDRESS '-ST-ZIP | | | | | ļ | |
| TITLE | D | ☐ Delete | TITL | | | | | | ☐ Addition | |
| NAME | HILTON, STEVEN J | | | _ | St | Steven J. Hilton | | | | |
| STREET ADDRESS CITY-ST-ZIP | 1 | | | EET ADDRESS '- ST- ZIP | 17851 N. 85th Street, Suite 300 Scottsdale, AZ 85255 | | | | | |
| TITLE | P Delete TITLE | | | | | | | ☐ Change | ☐ Addition | |
| NAME STREET ADDRESS | MEYER, JOHN 215 CELEBRATION PLACE, #500 STRI | | | | | | | | | |
| CITY-ST-ZIP | _ | | | -ST-ZIP | | | | | | |
| TITLÉ NAME | VT ☐ Delete ☐ IITLI MORGAN, RICHARD T ☐ NAM | | | | | 20 | מאלים מאלים | Change | Addition | |
| STREET ADDRESS CITY-ST-ZIP | 1000 11207 11 11 11 12 12 12 11 11 12 | | | EET ADDRESS '-ST-ZIP | | | | | | |
| TITLE | VS VS | ☐ Delete | TITL | | V | | | - Change | ☐ Addition | |
| NAME | SEAY, LARRY W | | NAM | | Ľa | arry W. Seay | | ^ | _ | |
| STREET ADDRESS CITY-ST-ZIP | *************************************** | | | EET ADDRESS (-ST-ZIP | | 17851 N. 85 st Street, Suite 300 Scottsdale, AZ 85255 | | | | |
| TITLE | ASC | ☐X Delete | THTL | | VS | 3 | | ☐ Change | X Addition | |
| NAME STREET ADDRESS | BIGGS, VICKI ss 8501 EAST PRINCESS DRIVE, #290 sire | | | | | . Timothy Wh 7851 N. 85# \$ | ite Street, Suite 300 | | | |
| CITY-ST-ZIP | SCOTTSDALE, AZ 85255 | | | (-ST-ZIP | Sc | cottsdale, AZ | 85255 | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address—with abother like empowered. | | | | | | | | | | |
| | | | | | | | | | | |
| SIGNATURE: | | | | | | | | | | |

NAW 5/1