2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005239

Entity Name: ARVIDA HOUSING L.P., INC.

FILED Apr 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 245 RIVERSIDE AVENUE, SUITE 500 JACKSONVILLE, FL 32202 **Current Mailing Address: New Mailing Address:** 245 RIVERSIDE AVENUE, SUITE 500 ATTN: LEGAL DEPT. JACKSONVILLE, FL 32202 FEI Number: 59-3602047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARX, CHRISTINE M 245 RIVERSIDE AVENUE, SUITE 500 JACKSONVILLE, FL 32202 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition GREENE, WM. BRITT Name: MOTTA, JAMES D Name: 7900 GLADES ROAD, SUITE 200 245 RIVERSIDE AVENUE SUITE 500 Address: Address: City-St-Zip: BOCA RATON, FL 33434 US City-St-Zip: JACKSONVILLE, FL 32202 US VTD Title: Title: () Delete () Change () Addition Name: REGAN, MICHAEL N Name: 245 RIVERSIDE AVENUE, SUITE 500 Address: Address: JACKSONVILLE, FL 32202 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition V/S PAINE, LAWRENCE MARX, CHRISTINE M Name: Name: 245 RIVERSIDE AVENUE, SUITE 500 245 RIVERSIDE AVENUE, SUITE 500 Address: Address: JACKSONVILLE, FL 32202 US City-St-Zip: JACKSONVILLE, FL 32202 US City-St-Zip: Title: () Delete Title: () Change () Addition WHITLATCH, SUSAN G Name: Name: Address: 245 RIVERSIDE AVENUE, SUITE 500 Address: City-St-Zip: JACKSONVILLE, FL 32202 US City-St-Zip: Title: Title: () Delete () Change (X) Addition Name: Name: LASSMAN, MARK D Address: 7900 GLADES ROAD SUITE 200 Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33433 Title: () Delete Title: () Change (X) Addition WILSON, RODERICK T Name: Name: 1701 E. COUNTY HWY 30-A Address: Address: City-St-Zip: City-St-Zip: SANTA ROSA BEACH, FL 32459

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.

SIGNATURE: SUSAN G. WHITLATCH AS 04/22/2004

MIRIAM GREENHUT, ASST. SECRETARY 245 RIVERSIDE AVE SUITE 500 JACKSONVILLE, FL 32202

DAVID F. CHILDERS III, ASST. TREASURER 245 RIVERSIDE AVE SUITE 500 JACKSONVILLE, FL 32202

JEFFREY S. GOTTLIEB, VICE PRESIDENT 245 RIVERSIDE AVE SUITE 500 JACKSONVILLE, FL 32202