

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029191

FILED
Apr 26, 2007
Secretary of State

Entity Name: M/I HOMES OF WEST PALM BEACH, LLC

Current Principal Place of Business:

4 HARVARD CIRCLE
SUITE 950
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

3 EASTON OVAL
STE 500
COLUMBUS, OH 43219

New Mailing Address:

3 EASTON OVAL
SUITE 500
COLUMBUS, OH 43219

FEI Number: 75-3087794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: M/I HOMES OF FLORIDA, , LLC
Address: 3 EASTON OVAL STE 500
City-St-Zip: COLUMBUS, OH 43219

Title: CEOP () Delete
Name: SCHOTTENSTEIN, ROBERT H
Address: 3 EASTON OVAL STE 500
City-St-Zip: COLUMBUS, OH 43219

Title: CFO () Delete
Name: CREEK, PHILLIP G
Address: 3 EASTON OVAL, SUITE 500
City-St-Zip: COLUMBUS, OH 43219

Title: S () Delete
Name: MASON, J. THOMAS
Address: 3 EASTON OVAL STE 500
City-St-Zip: COLUMBUS, OH 43219

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: M/I HOMES OF FLORIDA, , LLC
Address: 4343 ANCHOR PLAZA PARKWAY, STE 200
City-St-Zip: TAMPA, FL 33634

Title: CEOP (X) Change () Addition
Name: SCHOTTENSTEIN, ROBERT H
Address: 3 EASTON OVAL SUITE 500
City-St-Zip: COLUMBUS, OH 43219

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MASON, J. THOMAS
Address: 3 EASTON OVAL SUITE 500
City-St-Zip: COLUMBUS, OH 43219

Title: VP () Change (X) Addition
Name: SIKORSKI, FRED J
Address: 4343 ANCHOR PLAZA PARKWAY, STE 200
City-St-Zip: TAMPA, FL 33634

Title: VP () Change (X) Addition
Name: SELLINGER, JOHN S
Address: 4 HARVARD CIRCLE, SUITE 950
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: PHILLIP G. CREEK

CFO

04/26/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date