

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001618

FILED
Apr 16, 2012
Secretary of State

Entity Name: CENTEX MULTI-FAMILY ST. PETE HOLDING COMPANY, L.L.C.

Current Principal Place of Business:

100 BLOOMFIELD HILLS PARKWAY
SUITE 300
BLOOMFIELD HILLS, MI 48304 US

New Principal Place of Business:

Current Mailing Address:

100 BLOOMFIELD HILLS PARKWAY
SUITE 300
BLOOMFIELD HILLS, MI 48304 US

New Mailing Address:

FEI Number: 75-2841117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: VT
Name: ROBINSON, BRUCE
Address: 100 BLOOMFIELD HILLS PARKWAY STE 300
City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

Title: MGRV
Name: COOK, STEVEN
Address: 100 BLOOMFIELD HILLS PARKWAY STE 300
City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

Title: AVP
Name: ANDERSON, CADE C
Address: 100 BLOOMFIELD HILLS PARKWAY STE 300
City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

Title: MGR
Name: O'SHAUGHNESSY, ROBERT
Address: 100 BLOOMFIELD HILLS PARKWAY STE 300
City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

I hereby 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: CADE C ANDERSON

AVP

04/16/2012

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