

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000049701

FILED
Apr 23, 2012
Secretary of State

Entity Name: G.L. HOMES OF DAVIE II CORPORATION

Current Principal Place of Business:

1600 SAWGRASS CORP PKWY
STE 400
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

1600 SAWGRASS CORP PKWY
STE 400
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 65-1009385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELFMAN, STEVEN M ESQ.
1600 SAWGRASS CORP PKWY
STE 230
FORT LAUDERDALE, FL 33323 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

OFFICERS AND DIRECTORS:

Title: PD
Name: EZRATTI, ITZHAK
Address: 1600 SAWGRASS CORP PKWY, STE 400
City-St-Zip: SUNRISE, FL 33323

Title: VAS
Name: FANT, ALAN
Address: 1600 SAWGRASS CORP PKWY, STE 400
City-St-Zip: SUNRISE, FL 33323

Title: V
Name: NORWALK, RICHARD M
Address: 1600 SAWGRASS CORP PKWY, STE 400
City-St-Zip: SUNRISE, FL 33323

Title: S
Name: CORBAN, PAUL
Address: 1600 SAWGRASS CORP PKWY, STE 400
City-St-Zip: SUNRISE, FL 33323

Title: VT
Name: MENENDEZ, N. MARIA
Address: 1600 SAWGRASS CORP PKWY, STE 400
City-St-Zip: SUNRISE, FL 33323

Title: V
Name: HELFMAN, STEVEN M
Address: 1600 SAWGRASS CORP PKWY, STE 400
City-St-Zip: FORT LAUDERDALE, FL 33323

I hereby 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 all other like empowered.

SIGNATURE: RICHARD M. NORWALK

V

04/23/2012

Electronic Signature of Signing Officer or Director

Date