2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 01, 2007 8:00 am Secretary of State DOCUMENT # P04000122234 1. Entity Name 03-01-2007 90022 007 ***150.00 ZUCKERMAN HOMES AT LIVINGSTON, INC. Principal Place of Business Mailing Address 6131 LYONS RD 6131 LYONS RD SUITE 200 SUITE 200 COCONUT CREEK FL 33073 COCONUT CREEK FL 33073 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 4. FEI Number 20-1658933 City & State City & State Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BROWN, GARY L Street Address (P.O. Box Number is Not Acceptable) 4000 HOLLYWOOD BLVD STE 265-SOUTH HOLLYWOOD FL 33021 City 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, 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 Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE X Change ☐ Addition ZUCKERMAN, ANDREW NAME 6131 Lyons Road #200 3111 UNIVERSITY DRIVE STE 610 STREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33065 Coconut Creek, Fl. 33073 CITY-ST-ZIP CITY-ST ZIP TITLE TITLE ☐ Delete ☐ Addition ZUCKERMAN, STEVEN NAME NAMI 6131 Lyons Road #200 3111 UNIVERSITY DRIVE STE 610 STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33065** Coconut Creek, Fl. 33073 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete mæ Change Addition ZUCKERMAN, DAVID NAME NAME STREET ADDRESS 3111 UNIVERSITY DRIVE STE 610 6131 Lyons Road #200 STREET ADDRESS CORAL SPRINGS FL 33065 CITY-ST-ZIP CITY-ST-ZIP Coconut Creek, Fl. 33073 THE ☐ Delete THLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - 7IP CITY-ST-ZIP TITLE □ Delete DILE Change Addition NAME NAM(STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-SI-7IP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/07

954-481-3700

FILED