

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25378

FILED
Jan 28, 2009
Secretary of State

Entity Name: BOVIS LEND LEASE LMB, INC.

Current Principal Place of Business:

200 PARK AVENUE
9TH FLOOR
NEW YORK, NY 10166

New Principal Place of Business:

Current Mailing Address:

5909 PEACHTREE DUNWOODY ROAD
SUITE 500
ATLANTA, GA 30328

New Mailing Address:

FEI Number: 13-2986742 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SECY () Delete
Name: PORTELA, JOSEPH G
Address: 200 PARK AVENUE, 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: CEO () Delete
Name: MARCHETTO, PETER
Address: 200 PARK AVENUE, 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: EVP () Delete
Name: MELSON, MARK
Address: 200 PARK AVENUE, 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

Title: EVP () Delete
Name: ARFSTEN, JEFFREY
Address: ONE NORTH WACKER DRIVE/SUITE 850
City-St-Zip: CHICAGO, IL 60606

Title: TRES () Delete
Name: ROBINSON, BRAD
Address: 2550 WEST TYVOLA ROAD, SUITE 600
City-St-Zip: CHARLOTTE, NC 28217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CEO (X) Change () Addition
Name: BELLAMAN, MICHAEL D
Address: 200 PARK AVENUE, 9TH FLOOR
City-St-Zip: NEW YORK, NY 10166

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

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

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

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 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: JOSEPH G. PORTELA

SECY

01/28/2009

Electronic Signature of Signing Officer or Director

_____ Date