## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

NAME

STREET ADDRESS

D00000004565 (7)

DOCUM 1. Corporation I LENNAR		, INC.	) (r)					
Principal Place of Business Mailing Address						f admitten and admin state anter ma	*** ***** *****	\$\$\$\$\$ \$\$\$\$ \$ \$\$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$
760 NW 107TH SUITE 400 MIAMI FL 3317	I AVE	760 NW 1071 SUITE 400 MIAMI FL 33						
MINMI PE SST	•					<ol> <li>Date Incorporated or Qualifie</li> <li>11/16/1992</li> </ol>	3a. D	ate of Last Report <b>04/14/1995</b>
. Principal Pla	ce of Business	2a. Mailing Add	dress			4. FEI Number 65-0373288	——I . ——	Applied For Not Applicate
		Suite, Apt. #, etc.					\$8.75 Additional	
Suite, Apt. # I	, etc.	27 Soile, Apr.	#, 6to.			5. Certificate of Status Desired		Fee Required
City & State		City & Stat	e			6. Election Campaign Financing	[7]	<b>\$5.00</b> May Be
]		28				Trust Fund Contribution		Added to Fees
Zip	Country	Zip	]_	Country		8. This corporation has liability to	or intangible ′es □ No	e tax under s. 199.032,
<u> </u>	25	29		30		Florida Statutes   10. Name and Address of Nev		ed Agent
<del></del>	9. Name and Address of Curr	ent Registered Ager	<u> </u>	81	Name	TO. Mario and Addison of the		
NICAL ON	THOUSE E					70 C D Marketin Net Appea	tobla)	
NEALON, THOMAS F 760 NW 107 AVE.				82	Street	Address (P.O. Box Number is Not Accep	tabie)	
SUITE 400				83				
MIAMI FI				<u> </u>				85 Zip Code
1716/3/1911 1 1				84	City		F	L   13   24 0000
SIGNATURE _ 12. DILE NAME	OFFICERS A  AS  NEALON, THOMAS F III	AND DIRECTORS	ELETE	13. 1.1 TITLE		eq ired wher runstating! ADDITIONS/CHANGES TO C	DATE DEFICERS A	
NAME STREET ADDRESS	760 NW 107TH AVENUE,	STE 400		1.3 STREE	T ADDRESS			
CITY - S1 - ZIP	MIAMI FL			14 CITY-	ST-ZIP			
TiTLE	DVP		ELETE	2 1 TITLE		D/VP 1 1000	رسيد ه	Change Addition
NAME	LEWIS, WILLIAM M JR.			2.2 NAME		DIVP William M. Lewis 1585 Broadway		than
STREE I ADDRESS	1251 AVENUE OF THE AM	MERICAS 2ND FLI	JOR	2.3 STREE	i address	1585 Brookway,	37T	FIOUT
CITY-ST-ZIP	NEW YORK NY		F. CTC	2.4 CITY-		New York, NY	10056	Change
ITLE	DPST		DELETE	3 1 TITLE		regores D. Krass	nose	A change   Notice
NAME	KRASNOFF, JEFFERY P	w		3 2 NAME		TO NIN INTHA	ive	Ste. 400
STREET ADDRESS	760 NW 107 AVE. STE. 40	N			ET ADDRESS	Minni F1 33	172	
CITY - ST - ZIP	MIAMI FL		DELETE	3.4 CITY -		1-11 main, 1 1 20		☐ Charge ☐ Additi
NTL€	LEVIN, DAVID	□'	JEC 16	4.2 NAME				
NAME	760 NW 107 AVE, STE 40	0			ET ADDRESS			
STREET ADDRESS	MIAMI FL.	· <del>-</del>		4.4 CITY		3000018 -05/03/960	3068	313
CHY-ST-ZiP Ti!LE			DELETE	5. 1 TITLE			1054-	<b>-{∭</b> Change ☐ Additi
NAME				5.2 NAM		***200.00		
SIRFET ADDRESS				5 3 STRE	ET ADDRESS			
CITY-ST-ZIP				54 CiTY	CY 7:D	İ		
				34 6111	- 31 - ZIF			
TITLE			DELETE	5 1 TITL				☐ Change ☐ Addit

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indigated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or officior 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 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE:

6.3 STREET ADDRESS

64 CITY-ST-ZIP