

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90247 014 ***150.00

DOCUMENT # P92000013547

1. Corporation Name

LENNAR AFFILIATE PURCHASER CORPORATION

Principal Place of Business

760 NW 107TH AVE
MIAMI FL 33172
US

Mailing Address

760 NW 107TH AVE
MIAMI FL 33172
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/22/1992

4. FEI Number

65-0383014

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

Suite 300

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite 300

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

RUBIN, SHELLY
760 NW 107TH AVE
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

Suite 300

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
SAIONTZ, STEVEN J.
760 NW 107TH AVE
MIAMI FL 33172

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
MILLER, STUART A
700 NW 107TH AVE.
MIAMI FL 33172

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
KRASNOFF, JEFFREY P.
760 NW 107TH AVE
MIAMI FL 33172

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
RUBIN, SHELLY
760 NW 107TH AVE
MIAMI FL 33172

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
MCMICKLE, J. T.
760 NW 107TH AVE
MIAMI FL 33172

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
JORDAN, MARGARET
760 NW 107TH AVE
MIAMI FL 33172

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☒ Addition

Suite 300

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☒ Addition

Suite 300

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☒ Addition

Suite 300

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☒ Change ☒ Addition

AS Arnette, Peta-Gay
Suite 300

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☒ Addition

Suite 300

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MARGARET JORDAN, TREASURER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)