2005 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED Apr 29, 2005 8:00 am Secretary of State

ANNUAL KEPUKI					Secretary of State			
DOCUMENT # P93000046533 1. Entity Name LENNAR PARTNERS, INC.					04-2	29-2005 902	237 019 ***15	0.00
Principal Place of Business 1601 WASHINGTON AVE., STE 800		Mailing Address 1601 WASHINGTON AVE., STE 800			14008682			
MIAM! BEAC!	I, FL 33139 US	MIAMI BEACH, FL 3313	39 US			210000		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04062005 Ch	g-P C	R2E034 (10/03)	
City & State		City & State			4. FEI Number 65-0421632		Applied For Not Applicable	
Zip Country		Zip	Country	5. Certificate of Status Desir		Desired [\$8.75 Additional Fee Required	
-	6. Name and Address of Current R			7. Name and Address	s of New Regist	ered Agent		
RUBIN, SHELLY					Zena Dickstein		<u> </u>	
1600 WASHINGTON AVE., STE 800 MIAMI BEACH, FL 33139			Street A	ddress (i	P.O. Box Number is Not	Acceptable)		
	,		Cíty				Tip Code	
					ad agent or bath in the	State of Clasica	FL 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 Start St								
					00 May Be ed to Fees		*	
10.	OFFICERS AND D	DIRECTORS	11,		ADDITIONS/CHANGI	ES TO OFFICERS	S AND DIRECTORS	S IN 11
TITLE NAME	V RUBIN, SHELLY	☐ Delete	TITLE NAME	V s	Steven N. Bjerke	•	Change	Addition
STREET ADDRESS CITY-ST-ZIP	1601 WASHINGTON AVE., STE 8 MIAMI BEACH, FL 33139	00	STREET ADDRESS CITY - ST - ZIP		novem in Djerke	•		
TITLE	T	☐ Delete	TITLE		•		Change	☐ Addition
NAME STREET ADDRESS	SHERMAN, MICHAEL J 1601 WASHINGTON AVE., STE, 8	300	NAME STREET ADDRESS	[1	Margaret A. Jorda	n	•	
CITY-ST-ZIP	MIAMI BEACH, FL 33139		CITY-ST-ZIP					
TITLE NAME	D SAIONTZ, STEVEN J.	☐ Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	848 BRICKELL AVE. #100 MIAMI, FL 33131		STREET ADDRESS CITY-ST-ZIP			~		
TITLE	DC MILLER, STUART A	☐ Delete	THLE	TC 10	ffrey P. Krasnoff		Change	Addition
NAME Street address	700 NW 107TH AVE., STE. 400		NAME STREET ADDRESS					
CITY-ST-ZIP	MIAMI, FL 33172		CITY-ST-ZIP	,M	iami Beach, FL 331	39	——————————————————————————————————————	
TITLE NAME	AC LIEBERMAN, ARTHUR J	☐ Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	1601 WASHINGTON AVE., STE 8 MIAMI BEACH, FL 33139	00	STREET ADDRESS CITY-ST-ZIP					
TITLE	AC COOK BALLA I	☐ Delete	TITLE				☐ Change	Addition
NAME Street address	COOK, PAULA J 1601 WASHINGTON AVE., STE.	300	NAME STREET ADORESS					
CITY-ST-ZIP	MIAMI BEACH, FL 33139		CITY-ST-ZIP					

12. 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 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:

SIGNATURE AND PRETOR PRINTED NAME OF SIGNING OF THE OF DIRECTOR

Steven N. Bjerke

4/34/05 (305) 695-5500

Davtime Phone #