FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000066817 (5)

1. Corporation Name
REGENCY HOMES OF ST. LUCIE, INC.

Principal Place of Business
2826 UNIVERSITY DR.
CORAL SPRINGS FL 33065

Mailing Address
2826 UNIVERSITY DR.
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/12/1994
3a. Date of Last Report

21 2. Principal Place of Business
26 2a. Mailing Address
4. FEI Number: 65-0524489 — Applied For / Not Applicable
22 Suite, Apt. #, etc.
27 Suite, Apt. #, etc.
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
23 City & State
28 City & State
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
24 Zip / 25 County
29 Zip / 30 County
8. The corporation has filed its annual report under S. 199.007, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
GILLESPIE, R. BOWEN III
1515 S. FEDERAL HWY.
SUITE 300
BOCA RATON FL 33432

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	→ D + P ☐ Change ☐ Addition
NAME	JENSEN, E.C.	1.2 NAME	
STREET ADDRESS	2826 UNIVERSITY DR.	1.3 STREET ADDRESS	
CITY, ST, ZIP	CORAL SPRINGS FL 33065	1.4 CITY, ST, ZIP	
TITLE	[redacted]	2.1 TITLE	V.P. ☐ Change ☐ Addition
NAME	[redacted]	2.2 NAME	LYNN W. BARNES
STREET ADDRESS	2826 UNIVERSITY DR.	2.3 STREET ADDRESS	
CITY, ST, ZIP	CORAL SPRINGS FL 33065	2.4 CITY, ST, ZIP	(SAME)
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	600001475456
STREET ADDRESS		4.3 STREET ADDRESS	-05/04/95--01027--016
CITY, ST, ZIP		4.4 CITY, ST, ZIP	****2180.00 ****200.00
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	BPT511 ☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

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)(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.

SIGNATURE: E. C. Jensen — E. C. JENSEN — 4/28/95 — 305-755-1775

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Telephone Number

0100766 CP