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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90246 042 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P94000092376

1. Corporation Name
LENNAR U.S. HOLDINGS, INC.



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

2. Principal Place of Business: SUITE 300, MIAMI FL 33172, US
 2a. Mailing Address: SUITE 300, MIAMI FL 33172, US

3. Date Incorporated or Qualified: 12/22/1994
 4. FEI Number: 65-0565646
 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

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: SUITE 300, MIAMI FL 33172

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D MILLER, LEONARD 700 NW 107TH AVENUE MIAMI FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	V RUBIN, SHELLY 760 NW 107TH AVE MIAMI FL 33172	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	Suite 300
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	T JORDAN, MARGARET 760 NW 107TH AVE MIAMI FL 33172	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	Suite 300
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DCEO SAIONTZ, STEVEN J. 760 NW 107TH AVE MIAMI FL 33172	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	Suite 314
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	AS MCMICKLE, J. T. 760 NW 107TH AVE MIAMI FL 33172	5.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	AS PETA-GAY ARNETT
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Suite 300
TITLE	DC MILLER, STUART A. 700 NW 107 AVE MIAMI FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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* MARGARET JORDAN, TREAS. 4/26/99 305-485 2000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/198)