Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90246 045 ***150.00

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

DOCUMENT # P95000035650

1. Corporation Name

LENNAR SEABOARD HOLDINGS, INC.

Principal Place of Business Mailing Address						4 1901/000 tie (alb) atitt abitt abitt antit antit antie antie titel atite a			SE BITTE BUILT TOUT
760 NW 107TH AVE 760 NW 107TH AVE									
MIAMI FL 33172 MIAMI FL 33172					İ	DO NOT WRITE IN THIS SPACE			
US US					F	3. Date Incorporated or Qualifed	12 114 17110 1	JI MOL	
					ļ	05/08/1995			-
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number			Applied For
21 26						65-0582391			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, e			~~~			5. Certificate of Status Desired			Additional
22 SUHE 300 27 JUINE									Required
City & State City & State			•			6. Election Campaign Financing			0 May Be d to Fees
Zip Country Zip			Country			Trust Fund Contribution			1 to rees
Zip		30			This corporation owes the curr Personal Property Tax.		Yes	□No	
24	9. Name and Address of Curre		<u> </u>		1	10. Name and Address of New F		 	
	g. Hamo and Abarras of Come	- Togoto ou Agont	81	Name		101			
RUBIN, SHELLY				-	8.3.3	- (D.O. Day Number in Not Assent			
760 NW 107TH AVE			82	Street	DI +	s (P.O. Box Number is Not Accepta & S OO	in e)		
MIAN	AI FL 33172		83		 .				
			0.4	Cir				85 Zig	p Code
}			84	City			FL	65 2.1	, 0000
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									ts 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									
GIGHATORE	Signature, typed or printed name of registered ag			nt signature r	required wi	hen reinstating)	DATE		
12.			13.		т	ADDITIONS/CHANGES TO OF	FICERS ANI	D DIREC1 ☐ Change	
TITLE	D .	☐ DELETE	1.1 TITLE					Orlange	,
NAME	MILLER, LEONARD	l	1.2 NAME	*	1				ľ
STREET ADDRESS	700 N.W. 107TH AVE.			TADDRESS					
CITY-ST-ZIP TITLE	MIAMI FL 33172 DCEO	☐ DELETE	1.4 CITY-5 2.1 TITLE	I-ZIP				☐ Change	e Addition
NAME	SAIONTZ, STEVEN J.		2.2 NAME		ļ			_	<i></i>
STREET ADDRESS	TAG 5047 407711 4107			TADDRESS	, ہے ا	Chambel .			
	MIAMI FL 33172		2. 4 CITY-		2	inte 314			
CITY-ST-ZIP	V V	☐ DELETE	3.1 TITLE					☐ Change	e Addition
NAME	RUBIN, SHELLY	,	3.2 NAME		1				/
STREET ADDRESS			3.3 STREE	T ADDRESS	_ ا	sule 300			
CITY-ST-ZIP	MIAMI FL 33172		3.4. CITY-	ST-ZIP	2	Smee Sol			
TITLE	T	☐ DELETE	4.1 TITLE					☐ Change	e Addition (
NAME	JORDAN, MARGARET		4, 2 NAME						,
STREET ADDRESS			4.3 STREE	T ADDRESS		- : A	_		
CITY-ST-ZIP	MIAMI FL 33172		4.4 CITY-S	T-ZIP		suite 300	<u> </u>		
TITLE	D	☐ DELETE	5.1 TITLE		1			Change	e 🗌 Addition
NAME	MILLER, STUART A		5.2 NAME						İ
STREET ADDRESS	700 N.W. 107TH AVE.			TADORESS					
CITY-ST-ZIP	MIAMI FL 33172		5.4 CITY-S	T-ZIP	 				
TITLE	AS	▼ DELETE	6.1 TITLE		A	غ المركز المركز المركز المركز المركز المركز المركز المركز المركز المركز المركز المركز المركز المركز المركز الم	-11	Change	e Addition
NAME	MCMICKLE, J. T.		6.2 NAME	_	P	- fA-GAY ARNO	11/2	_	, ,
STREET ADDRESS	760 NW 107TH AVE		6.3 STREE	TADDRESS	1 🗀		· 1	- 1	_

6.4 CITY-ST-ZIP MIAMI FL 33172 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, TREAS. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR