PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # V24079

LENNAR FUNDING CORPORATION

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

04-29-1999 90247 006 ***150.00



Principal Place of Business Mailing Address						T (801) WINNES HOUS BERNEL DEN DEN DEN DIAN DI	ATT BEIGH GIGH	DISH BIRN IDDI	
760 NW 107TH MIAMI FL 33172		760 107TH AVE MIAMI FL 33172	MIAMI FL 33172			DO NOT WRITE IN THIS	SPACE		
us us						3. Date Incorporated or Qualifed			
						03/26/1992			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	A	pplied For	
21		— ·	26			65-0326984	N	ot Applicable	
Suite, Agt,	#, etc.	Suite, Apt, #, etc.				_	\$8.75 Additional		
22/2/1/1/		27 0 1/16 3C	27 SILTE 300			5. Certificate of Status Desired	Fee R	lequired	
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be			
23	·	28				Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Into			
24	25	29	30			Personal Property Tax.	ZN/es	□No	
	9. Name and Address of Currer	nt Registered Agent		- T		10. Name and Address of New Registered	Agent .		
			1	81	Name				
	n, shelly Nw 107th ave		1		Street Ad	ress (P.O. Box Number is Not Acceptable)			
				<u>\$01</u>	<u>4e 300</u>				
MIAN	II FL 33172			83					
				84	City		85 Zip	Code	
					-	<u> </u>			
office or n	to the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was a	authonzed	I DV 1	-named co the corpora	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appoin	changing it ntment as r	s registered egistered	
SIGNATURE	•								
	Signature, typed or printed name of registered age	· · · · · · · · · · · · · · · · · · ·		Agent	signature requ	uired when reinstating) DATE ADDITIONS (QUANISES TO OFFICE BS AN	D DIRECT	OPS IN 12	
12.		ND DIRECTORS	13. 1.1 TII	n =		ADDITIONS/CHANGES TO OFFICERS AN	Change		
TITLE	- I						7	1	
NAME	MILLER, LEONARD			1.2 NAME		700 NW 10T AVE			
STREET ADDRESS	OO MIT TOTALL ATE								
CITY-ST-ZIP (MIAMI FL 33172	☐ DELETE	2.1 TII	TY-ST	-ZIP		Change	Addition	
TITLE	V OUGLEV		2.2 NA				_ ,		
NAME	RUBIN, SHELLY	1		2.3 STREET ADDRESS		sute 300		ļ	
STREET ADDRESS	OF INT IOTHER							Î	
CITY-ST-ZIP	FI DELETE 24		2. 4 CI 3.1 TII		1-ZIP		Change	Addition	
TITLE	<u> </u>						7		
NAME	OTIONI, IIIATORIET				ADDRESS	Suite 300			
STREET ADDRESS	700 KII 107 III AVE		3.4. C			Sec 200			
CITY-ST-ZIP TITLE	MIAMI FL 33172	☐ DELETE	4.1 TF	_	1-21		Change	Addition	
	DC		4, 2 N			m coultre			
NAME	MILLER, STUART A.				ADDRESS	2014 1165			
STREET ADDRESS	700 NW 107TH AVE	107111742							
CITY-ST-ZIP TITLE	MIAMI FL DCEO	☐ DELET E	5,1 TI		-24		Change	4ddition	
NAME.			5.2 NA			•			
STREET ADDRESS	SAIONTZ, STEVEN J. 760 NW 107TH AVE		5.3 ST	REET	ADDRESS	Scute 21-16			
	******		5.4 CI	TY-ST	-ZIP				
CITY-ST-ZIP TITLE	MIAMI FL 33172 AS	⊠ DELETE	6.1 TI		- 1;	AS ARNETT, PETAGAY Sente 300	Change	Addition	
NAME	MCMICKLE, J. T.		6.2 N	ME	1,4	ARNETT PETA-GAY		1	
STREET ADDRESS				5.3 STREET ADDRESS		Sut 200	-		
CITY-ST-ZIP	FESS / NO INV IU/ III AVE			TY-81		9			
CHITCH ALL	**************************************								

MAMI 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.