

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 APR 14 PM 2:10

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # V56185 (4)

1. Corporation Name

LENNAR FLORIDA OFFICE Q.A., INC.

Principal Place of Business

**760 NW 107TH AVE
MIAMI FL 33172**

Mailing Address

**760 NW 107TH AVE
MIAMI FL 33172**

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified
08/07/1992

3a. Date of Last Report
03/11/1994

4. FEI Number
65-0360048

Applied For
☐ Not Applicable

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**NEALON, THOMAS 111 F
760 NW 107 AVE.
SUITE 400
MIAMI FL 33172**

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 607.1608, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DP
MILLER, STUART A
700 NW 107TH AVE
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DV
KAZLIONIS, PAUL D
1251 AVENUE OF THE AMER
NEW YORK NY**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**VST
KRASNOFF, JEFFERY P
760 NW 107 AVE. STE. 400
MIAMI FL 33172**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**AS
WATSKY, MORRIS J
700 NW 107 AVE.
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**VAS
LEVIN, DAVID
760 NW 107 AVE, STE 400
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

"SEE ATTACHED EXHIBIT A"

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

"SEE ATTACHED EXHIBIT A"

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

"SEE ATTACHED EXHIBIT A"

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☒ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/95

(205) 220-4300

V56185

EXHIBIT "A"

LIST OF OFFICERS/DIRECTORS
FOR THE VARIOUS PARTNERSHIP CORPORATE
GENERAL PARTNERS

William M. Lewis, Jr.

D/VP

**1251 Avenue of the Americas
28th Floor
New York, NY 10020**

Jeffrey P. Krasnoff

D/P/S/T

**700 NW 107th Avenue
Suite 400
Miami, FL 33172**

David Levin

VP

**760 NW 107th Avenue
Suite 400
Miami, FL 33172**

Thomas F. Nealon, III

AS

**760 NW 107th Avenue
Suite 400
Miami, FL 33172**