### 2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000143130

Entity Name: TAYLOR MORRISON ESPLANADE NAPLES, LLC

FILED
Oct 17, 2013
Secretary of State
CC4344993692

# **Current Principal Place of Business:**

4900 N. SCOTTSDALE ROAD SUITE 2000 SCOTTSDALE, AZ 85251

### **Current Mailing Address:**

4900 N. SCOTTSDALE ROAD SUITE 2000 SCOTTSDALE, AZ 85251 US

FEI Number: 45-4100117 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Address

551 NORTH CATTLEMEN RD.

Authorized Person(s) Detail:

Title MANAGING MEMBER Title PRESIDENT

Name TAYLOR MORRISON OF FLORIDA, Name KEMPTON, JOHN STEVEN

INC.

Address 4900 N. SCOTTSDALE ROAD SUITE 200

**SUITE 2000** 

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SCOTTSDALE AZ 85251

Title VP

Name CAMPBELL, MICHELLE M.

Address 551 NORTH CATTLEMEN RD. Address 4900 N. SCOTTSDALE ROAD SUITE 2000

551 NORTH CATTLEMEN RD. SUITE 2000 SUITE 200

City-State-Zip: SCOTTSDALE AZ 85251

Title TREASURER, VP Title SECRETARY, VP, GENERAL COUNSEL

COUNSEL

Name BOYD, CALVIN R. Name SHERMAN, DARRELL C.

Address 4900 N. SCOTTSDALE ROAD Address 4900 N. SCOTTSDALE ROAD

SUITE 2000 SUITE 2000

City-State-Zip: SCOTTSDALE AZ 85251 City-State-Zip: SCOTTSDALE AZ 85251

Title ASST. SECRETARY Title ASST. SECRETARY

Name ESTRADA, CAROLINE G. Name MERRILL, S. TODD

Address 4900 N. SCOTTSDALE ROAD Address 1211 N. WESTSHORE BLVD.

SUITE 2000 SUITE 512

City-State-Zip: SCOTTSDALE AZ 85251 City-State-Zip: TAMPA FL 33607

#### Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROLINE G. ESTRADA ASST. SECRETARY 10/17/2013

## Authorized Person(s) Detail Continued:

Title VP Title VP

Name MILLER, DOUGLAS D. Name STEFFENS, LOUIS E.

Address 1211 N. WESTSHORE BLVD. Address 1211 N. WESTSHORE BLVD.

SUITE 512 SUITE 512

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title VP Title VP

NameMANSFIELD, MICHAEL E.NameLONGENECKER, CAMMIE L.Address551 NORTH CATTLEMEN RD.Address551 NORTH CATTLEMEN RD.

SUITE 200 SUITE 200

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SARASOTA FL 34232

Title VP Title AUTHORIZED AGENT - LAND

Name SQUITIERI, ANTHONY ("TONY") J. Name ASHER, JOHN P.

Address 551 NORTH CATTLEMEN RD. Address 551 NORTH CATTLEMEN RD.

SUITE 200 SUITE 200

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - SALES Title ASST. TREASURER, VP

Name TER DOEST, ROBERT Name MCCHESNEY, VALERIE

Address 551 NORTH CATTLEMEN RD. Address 551 NORTH CATTLEMEN RD.

SUITE 200 SUITE 200

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SARASOTA FL 34232

Title VP Title AUTHORIZED AGENT - SALES

Name PALKA, RUSSELL Name BRIONES, TRACY

Address 551 NORTH CATTLEMEN RD. Address 551 NORTH CATTLEMEN RD.

SUITE 200 SUITE 200

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SARASOTA FL 34232