

**2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L11000143130

**FILED**  
**Jun 14, 2013**  
**Secretary of State**  
**CC9805899555**

**Entity Name:** TAYLOR MORRISON ESPLANADE NAPLES, LLC

**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

**Authorized Person(s) Detail :**

Title: MANAGING MEMBER  
Name: TAYLOR MORRISON OF FLORIDA, INC.  
Address: 4900 N. SCOTTSDALE ROAD SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title: PRESIDENT  
Name: KEMPTON, JOHN S.  
Address: 551 NORTH CATTLEMEN RD. SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title: ASST. TREASURER, VP  
Name: CAMPBELL, MICHELLE M.  
Address: 551 NORTH CATTLEMEN RD. SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title: CFO, VP  
Name: CONE, C. DAVID  
Address: 4900 N. SCOTTSDALE ROAD SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title: TREASURER, VP  
Name: BOYD, CALVIN R.  
Address: 4900 N. SCOTTSDALE ROAD SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title: SECRETARY, VP, GENERAL COUNSEL  
Name: SHERMAN, DARRELL C.  
Address: 4900 N. SCOTTSDALE ROAD SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title: ASST. SECRETARY  
Name: ESTRADA, CAROLINE G.  
Address: 4900 N. SCOTTSDALE ROAD SUITE 2000  
City-State-Zip: SCOTTSDALE AZ 85251

Title: ASST. SECRETARY  
Name: MERRILL, S. TODD  
Address: 1211 N. WESTSHORE BLVD. SUITE 512  
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**

**06/14/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title VP  
Name MILLER, DOUGLAS D.  
Address 1211 N. WESTSHORE BLVD.  
SUITE 512  
City-State-Zip: TAMPA FL 33607

Title VP  
Name MANSFIELD, MICHAEL E.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title VP  
Name RUSHNELL, DEVON S.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - LAND  
Name ASHER, JOHN P.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - SALES  
Name MCCHESENEY, VALERIE  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title VP  
Name STEFFENS, LOUIS E.  
Address 1211 N. WESTSHORE BLVD.  
SUITE 512  
City-State-Zip: TAMPA FL 33607

Title VP  
Name LONGENECKER, CAMMIE L.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title VP  
Name SQUITIERI, ANTHONY ("TONY") J.  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232

Title AUTHORIZED AGENT - SALES  
Name TER DOEST, ROBERT  
Address 551 NORTH CATTLEMEN RD.  
SUITE 200  
City-State-Zip: SARASOTA FL 34232