

Texas Franchise Tax Public Information Report

To be filed by Corporations, Limited Liability Companies (LLC), Limited Partnerships (LP), Professional Associations (PA) and Financial Institutions

Tcode 13196

Taxpayer number: 32054834604
Report year: 2018

You have certain rights under Chapter 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at 1-800-252-1381.

Taxpayer name: CENTURY LAND HOLDINGS OF TEXAS, LLC
Mailing address: 8390 E. Crescent Parkway, #650
City: Greenwood Village, State: CO, ZIP code plus 4: 80111
Secretary of State (SOS) file number or Comptroller file number: 0802040961

Blacken box if there are currently no changes from previous year; if no information is displayed, complete the applicable information in Sections A, B and C.

Principal office
Principal place of business



You must report officer, director, member, general partner and manager information as of the date you complete this report.

Please sign below! This report must be signed to satisfy franchise tax requirements.

3205483460418

SECTION A Name, title and mailing address of each officer, director, member, general partner or manager.

Table with 3 columns: Name, Title, Director (YES/NO), Term expiration (m m d d y y), Mailing address (City, State, ZIP Code). Rows include Dale Francescon (CEO), Robert Francescon (CEO), and Dave Messenger (CFO).

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Table with 4 columns: Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution, State of formation, Texas SOS file number, if any, Percentage of ownership.

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Table with 4 columns: Name of owned (parent) corporation, LLC, LP, PA or financial institution, State of formation, Texas SOS file number, if any, Percentage of ownership. Example: Century Communities, Inc, DE, 0801802740, 100.

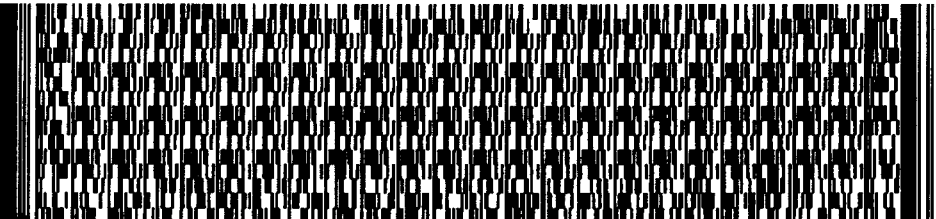
Registered agent and registered office currently on file (see instructions if you need to make changes). Agent: [Name], Office: [Address, City, State, ZIP Code].

The information on this form is required by Section 171.203 of the Tax Code for each corporation, LLC, LP, PA or financial institution that files a Texas Franchise Tax Report. Use additional sheets for Sections A, B and C, if necessary. The information will be available for public inspection.

I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief, as of the date below, and that a copy of this report has been mailed to each person named in this report who is an officer, director, member, general partner or manager and who is not currently employed by this or a related corporation, LLC, LP, PA or financial institution.

Signature line: sign here [Signature], Title: MANAGER, Date: 11/9/18, Area code and phone number: () -

Texas Comptroller Official Use Only



VE/DE [] PIR IND []



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Taxpayer name CENTURY LAND HOLDINGS OF TEXAS, LLC			<input type="checkbox"/> Blacken box if the mailing address has changed.
Mailing address 8390 E. Crescent Parkway, #650		Secretary of State (SOS) file number or Comptroller file number	
City Greenwood Village	State CO	ZIP code plus 4 80111	0802040961

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3205483460418

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Name Keith Guericke	Title	Director <input checked="" type="checkbox"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP Code
Name James Lippman	Title	Director <input checked="" type="checkbox"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP Code
Name John Box	Title	Director <input checked="" type="checkbox"/> YES	Term expiration m m d d y y
Mailing address	City	State	ZIP Code

SECTION B Enter information for each corporation, LLC, LP, PA or financial institution, if any, in which this entity owns an interest of 10 percent or more.

Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership
Name of owned (subsidiary) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership

SECTION C Enter information for each corporation, LLC, LP, PA or financial institution, if any, that owns an interest of 10 percent or more in this entity.

Name of owned (parent) corporation, LLC, LP, PA or financial institution	State of formation	Texas SOS file number, if any	Percentage of ownership
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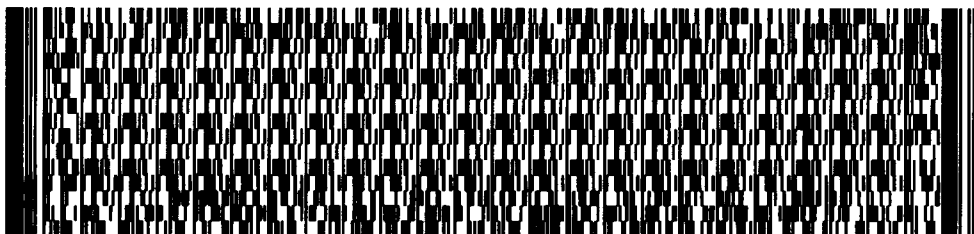
Registered agent and registered office currently on file (see instructions if you need to make changes) Agent:	You must make a filing with the Secretary of State to change registered agent, registered office or general partner information.		
Office:	City	State	ZIP Code

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sign here ▶	Title	Date	Area code and phone number () -
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VE/DE <input type="checkbox"/>	PIR IND <input type="checkbox"/>	
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