**Current Mailing Address:** 

Entity Name: LIFESPACE COMMUNITIES, INC.

4201 CORPORATE DRIVE WEST DES MOINES. IA 50266 US

**Current Principal Place of Business:** 

## FEI Number: 42-1068850

DOCUMENT# 839014

4201 CORPORATE DRIVE WEST DES MOINES. IA 50266

### Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD 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

## **Officer/Director Detail :**

Officer/Director Detail.					
Title	PRESIDENT & CEO	Title	DIRECTOR		
Name	JANTZEN, JESSE	Name	EPP, EDWIN LAVERNE J		
Address	4201 CORPORATE DRIVE	Address	4201 CORPORATE DRIVE		
City-State-Zip:	WEST DES MOINES IA 50266	City-State-Zip:	WEST DES MOINES IA 50266		
Title	DIRECTOR	Title	DIRECTOR		
Name	KEHM, ROBERT C	Name	SHIVES, PAULA J		
Address	4201 CORPORATE DRIVE	Address	4201 CORPORATE DRIVE		
City-State-Zip:	WEST DES MOINES IA 50266	City-State-Zip:	WEST DES MOINES IA 50266		
Title	DIRECTOR	Title	DIRECTOR		
Title Name	DIRECTOR DUTRA, ANA	Title Name	DIRECTOR SPANGLER, PATRICK		
Name	DUTRA, ANA 4201 CORPORATE DRIVE	Name	SPANGLER, PATRICK		
Name Address	DUTRA, ANA 4201 CORPORATE DRIVE	Name Address	SPANGLER, PATRICK 4201 CORPORATE DRIVE		
Name Address City-State-Zip:	DUTRA, ANA 4201 CORPORATE DRIVE WEST DES MOINES IA 50266	Name Address City-State-Zip:	SPANGLER, PATRICK 4201 CORPORATE DRIVE WEST DES MOINES IA 50266		
Name Address City-State-Zip: Title	DUTRA, ANA 4201 CORPORATE DRIVE WEST DES MOINES IA 50266 DIRECTOR	Name Address City-State-Zip: Title	SPANGLER, PATRICK 4201 CORPORATE DRIVE WEST DES MOINES IA 50266 DIRECTOR		
Name Address City-State-Zip: Title Name Address	DUTRA, ANA 4201 CORPORATE DRIVE WEST DES MOINES IA 50266 DIRECTOR YANOFSKY, NEAL	Name Address City-State-Zip: Title Name	SPANGLER, PATRICK 4201 CORPORATE DRIVE WEST DES MOINES IA 50266 DIRECTOR FIELDS, VENITA		

# 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NICHOLAS A. HARSHFIELD

CORP. SECRETARY/TREASURER

Electronic Signature of Signing Officer/Director Detail

# Certificate of Status Desired: Yes

FILED Feb 03, 2022 Secretary of State 5443576815CC

Date

Date

02/03/2022

#### **Officer/Director Detail Continued :**

Title Name Address City-State-Zip:	DIRECTOR DARKEY-HRINYA, JOYCE 4201 CORPORATE DRIVE WEST DES MOINES IA 50266	Title Name Address City-State-Zip:	CFO, TREASURER, AND CORPORATE SECRETARY HARSHFIELD, NICHOLAS A 4201 CORPORATE DRIVE WEST DES MOINES IA 50266
Title	DIRECTOR	Title	DIRECTOR
Name	COLLIER, SCOTT	Name	DOTTER, LAURIE
Address	4201 CORPORATE DRIVE	Address	4201 CORPORATE DRIVE
City-State-Zip:	WEST DES MOINES IA 50266	City-State-Zip:	WEST DES MOINES IA 50266
Title	BOARD MEMBER	Title	BOARD OF DIRECTOR
Name	DELVAUX, SUSAN JANE	Name	BLACKFORD, GARY
Address	4201 CORPORATE DRIVE	Address	4201 CORPORATE DRIVE
City-State-Zip:	WEST DES MOINES IA 50266	City-State-Zip:	WEST DES MOINES IA 50266
Title	BOARD OF DIRECTOR	Title	BOARD OF DIRECTOR
Name	SOKEYE, JONATHAN	Name	WILLIAMS, DAVID
Address	4201 CORPORATE DRIVE	Address	4201 CORPORATE DRIVE
City-State-Zip:	WEST DES MOINES IA 50266	City-State-Zip:	WEST DES MOINES IA 50266