Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# 839014

Entity Name: LIFESPACE COMMUNITIES, INC.

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

4201 CORPORATE DRIVE WEST DES MOINES. IA 50266

## **Current Mailing Address:**

4201 CORPORATE DRIVE WEST DES MOINES. IA 50266 US

## FEI Number: 42-1068850

## 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 :**

••••••			
Title	D	Title	D
Name	KADUCE, JOHN J	Name	WAGNER-HAUSER, ANN M
Address	9014 SE HAWKS NEST COURT	Address	5900 HERMITAGE TRAIL
City-State-Zip:	HOBE SOUND FL 33455	City-State-Zip:	MINNETRISTA MN 55364
Title	VP, CHIEF FINANCIAL OFFICER AND TREASURER	Title	VP, GENERAL COUNSEL AND SECRETARY
Name	SMITH, LARRY M	Name	HIRSCH, JODI K
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	PD	Title	CDV
Name	BENTLEY, MEREDITH S	Name	EPP, EDWIN LAVERNE J
Address	4201 CORPORATE DRIVE	Address	1109 WEST HILLS TERRACE
City-State-Zip:	WEST DES MOINES IA 50266	City-State-Zip:	LAWRENCE KS 66044-2546
Title	CD	Title	DIRECTOR
Name	KEHM, ROBERT C	Name	BOURNE, DONALD W
Address	12905 WALMAR	Address	721 PALO ALTO COURT
City-State-Zip:	OVERLAND PARK KS 66209	City-State-Zip:	PASO ROBLES CA 93446
		•	•

## **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: JODI HIRSCH

01/30/2017 **GENERAL COUNSEL** 

Date

## FILED Jan 30, 2017 Secretary of State CC1885997264

Certificate of Status Desired: No

Date

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

Title	DIRECTOR	Title	VICE PRESIDENT OF HUMAN RESOURCES
Name	SHIVES, PAULA J	Name	LEONHARDT, JOEILYNN M
Address	2011 VIA TUSCANY	Address	4201 CORPORATE DRIVE
City-State-Zip:	WINTER PARK FL 32789		
		City-State-Zip:	WEST DES MOINES IA 50266
Title	VICE PRESIDENT OF CLINICAL SERVICES	Title	DIRECTOR
Name	HAMM, SARA	Name	DUTRA, ANA
Address	4201 CORPORATE DRIVE		
City-State-Zip:	WEST DES MOINES IA 50266	Address	425 SUNSET RIDGE ROAD
		City-State-Zip:	NORTHFIELD IL 60093
Title	DIRECTOR	Title	DIRECTOR
Name	SPANGLER, PATRICK		
Address	1785 BRIDGEWATER ROAD	Name	YANOFSKY, NEAL
City-State-Zip:	GOLDEN VALLEY MN 55422	Address	5911 GLENDORA AVENUE
		City-State-Zip:	DALLAS TX 75230