2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 839014

Entity Name: LIFESPACE COMMUNITIES, INC.

Jan 05, 2016 Secretary of State CC2597948303

FILED

Current Principal Place of Business:

100 E GRAND AVENUE

SUITE 200

DES MOINES, IA 50309-1835

Current Mailing Address:

100 E GRAND AVENUE

SUITE 200

DES MOINES, IA 50309-1835 US

FEI Number: 42-1068850 Certificate of Status Desired: No

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:

Name

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title D Title

KADUCE, JOHN J Name 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

VP, CHIEF FINANCIAL OFFICER AND Title VP, GENERAL COUNSEL AND Title

TREASURER **SECRETARY**

HIRSCH, JODI K Name Name SMITH, LARRY M

100 E GRAND AVENUE Address 100 E. GRAND AVE., SUITE 200 Address

SUITE 200 DES MOINES IA 50309 City-State-Zip:

DES MOINES IA 50309-1835 City-State-Zip:

Title Title CDV

BENTLEY, MEREDITH S EPP, EDWIN LAVERNE J Name Address 100 E. GRAND AVE., SUITE 200 1109 WEST HILLS TERRACE Address

City-State-Zip: DES MOINES IA 50309 City-State-Zip: LAWRENCE KS 66044-2546

Title CD Title DIRECTOR

Name KEHM, ROBERT C Name BOURNE, DONALD W 12905 WALMAR Address 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.

01/05/2016 SIGNATURE: JODI K. HIRSCH GENERAL COUNSEL

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Address

Title **DIRECTOR** Title DIRECTOR

Name SHIVES, PAULA J Name DRAGONETTE, RITA M

2011 VIA TUSCANY 680 NORTH LAKE SHORE DRIVE Address Address

#422

City-State-Zip: WINTER PARK FL 32789 City-State-Zip: CHICAGO IL 60611

Title VICE PRESIDENT OF HUMAN RESOURCES VICE PRESIDENT OF CLINICAL Title LEONHARDT, JOEILYNN M Name

SERVICES Name HAMM, SARA 100 EAST GRAND AVENUE

SUITE 200 Address 100 E GRAND AVENUE City-State-Zip: DES MOINES IA 50309

SUITE 200

City-State-Zip: DES MOINES IA 50309-1835