

2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 05, 2016
Secretary of State
CC8572456359

Entity Name: LIFESPACE SERVICES, INC.

Current Principal Place of Business:

100 E. GRAND AVE.
STE 200
DES MOINES, IA 50309

Current Mailing Address:

100 E. GRAND AVE.
STE 200
DES MOINES, IA 50309

FEI Number: 27-3271147

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CDV
Name EPP, EDWIN LAVERNE J
Address 1109 WEST HILLS TERRACE
City-State-Zip: LAWRENCE KS 66044-2546

Title CD
Name KEHM, ROBERT C
Address 12905 WALMAR
City-State-Zip: OVERLAND PARK KS 66209

Title D
Name BOURNE, DONALD W
Address 721 PALO ALTO COURT
City-State-Zip: PASO ROBLES CA 93446

Title DIRECTOR
Name SHIVES, PAULA J
Address 2011 VIA TUSCANY
City-State-Zip: WINTERPARK FL 32789

Title DIRECTOR
Name DRAGONETTE, RITA M
Address 680 NORTH LAKE SHORE DRIVE #422
City-State-Zip: CHICAGO IL 60611

Title VICE PRESIDENT OF HUMAN RESOURCES
Name LEONHARDT, JOEILYNN M
Address 100 E. GRAND AVENUE SUITE 200
City-State-Zip: DES MOINES IA 50309

Title CFO
Name SMITH, LARRY M
Address 100 E. GRAND AVENUE SUITE 200
City-State-Zip: DES MOINES IA 50309

Title DIRECTOR
Name KADUCE, JOHN J
Address 9014 SE HAWKS NEST COURT
City-State-Zip: HOBE SOUND FL 33455

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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 K. HIRSCH

GENERAL COUNSEL

01/05/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WAGNER-HAUSER, ANN M
Address 4220 COUNTY RD. 44
City-State-Zip: MINNESTRISTRA MN 55364

Title VP, SECRETARY AND GENERAL COUNSEL
Name HIRSCH, JODI K.
Address 100 EAST GRAND AVE., SUITE 200
City-State-Zip: DES MOINES IA 50309

Title PRESIDENT, CEO, DIRECTOR
Name BENTLEY, MEREDITH SLOAN
Address 100 EAST GRAND AVE., SUITE 200
City-State-Zip: DES MOINES IA 50309

Title VICE PRESIDENT OF CLINICAL SERVICES
Name HAMM, SARA
Address 100 E. GRAND AVE.
STE 200
City-State-Zip: DES MOINES IA 50309