

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001362

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** DEL WEBB COMMUNITY MANAGEMENT CO.

**Current Principal Place of Business:**

100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
BLOOMFIELD HILLS, MI 48304

**New Principal Place of Business:**

**Current Mailing Address:**

100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
BLOOMFIELD HILLS, MI 48304

**New Mailing Address:**

**FEI Number:** 95-2215185

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: DUGAS, RICHARD J JR  
Address: 100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: DVAS  
Name: NELSON, GREGORY M  
Address: 100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: VPC  
Name: SCHWENINGER, MICHAEL J  
Address: 100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: AS  
Name: KLYM, JAN M  
Address: 100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: VTAS  
Name: ROBINSON, BRUCE E  
Address: 100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: DVPS  
Name: COOK, STEVEN M  
Address: 100 BLOOMFIELD HILLS PARKWAY, SUITE 300  
City-St-Zip: BLOOMFIELD HILLS, MI 48304

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAN M KLYM

AS

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date