

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003307

Entity Name: WCI COMMUNITIES, INC.

FILED
Mar 24, 2010
Secretary of State

Current Principal Place of Business:

24301 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

24301 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 27-0472098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HASTINGS, VIVIEN
24301 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: FRY, DAVID
Address: 24301 WALDEN CENTER DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SVP
Name: DEVENDORF, RUSSELL
Address: 24301 WALDEN CENTER DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SVPS
Name: HASTINGS, VIVIEN
Address: 24301 WALDEN CENTER DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SVP
Name: SCHWARTZ, DOUGLAS
Address: 24301 WALDEN CENTER DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SVP
Name: OAK, TIMOTHY
Address: 24301 WALDEN CENTER DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SVP
Name: WALKER, DIANNA
Address: 24301 WALDEN CENTER DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

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: VIVIEN HASTINGS

SVPS

03/24/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date

Fax:

Mar 24 2010 03:44pm P002/003

F09000003307

3-24-10

Additional Officers – WCI Communities, Inc.
Document # F09000003307
Annual Report

OFFICERS AND DIRECTORS	
Title: SVP Name: Ed D'Alessandro Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134	Title: SVP Name: Reinaldo Mesa Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134
Title: VP Name: Richard Barber Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134	Title: VP Name: Jackie Buckler Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134
Title: VP Name: John Ferry Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134	Title: VP Name: Christine Green Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134
Title: VP Name: Robert King Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134	Title: VP Name: Craig Klingensmith Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134
Title: VPT Name: Sheila Leith Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134	Title: VP Name: Nicole Swartz Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134
Title: D Name: Patrick J. Bartels, Jr. Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134	Title: D Name: Michelle MacKay Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134
Title: D Name: John Peshkin Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134	Title: D Name: Stephen Plavin Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134
Title: D Name: Mark Porath Street Address: 24301 Walden Center Drive City-St-Zip: Bonita Springs, FL 34134	