

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000300

FILED
Apr 23, 2010
Secretary of State

Entity Name: DEVELOPERS DIVERSIFIED REALTY CORPORATION

Current Principal Place of Business:

3300 ENTERPRISE PKWY
BEACHWOOD, OH 44122

New Principal Place of Business:

Current Mailing Address:

3300 ENTERPRISE PKWY
BEACHWOOD, OH 44122

New Mailing Address:

FEI Number: 34-1723097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: VP
Name: SABATOS, JOHN
Address: 3300 ENTERPRISE PKWY
City-St-Zip: BEACHWOOD, OH 44122

Title: CEO
Name: HURWITZ, DANIEL B
Address: 3300 ENTERPRISE PKWY
City-St-Zip: BEACHWOOD, OH 44122

Title: SVP
Name: WEISS, DAVID E
Address: 3300 ENTERPRISE PKWY
City-St-Zip: BEACHWOOD, OH 44122

Title: CFO
Name: OAKES, DAVID J
Address: 3300 ENTERPRISE PARKWAY
City-St-Zip: BEACHWOOD, OH 44122

Title: SEC
Name: ALLGOOD, JOAN V
Address: 3300 ENTERPRISE PARKWAY
City-St-Zip: BEACHWOOD, OH 44122

Title: SVP
Name: SCHULTZ, CRAIG A
Address: 3300 ENTERPRISE PARKWAY
City-St-Zip: BEACHWOOD, OH 44122

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: CRAIG A SCHULTZ

SVP

04/23/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date