2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000056011

Entity Name: WCI TOWERS, INC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 24301 WALDEN CENTER DRIVE BONITA SPRINGS, FL 34134 **Current Mailing Address: New Mailing Address:** 24301 WALDEN CENTER DRIVE BONITA SPRINGS, FL 34134 FEI Number: 20-1179513 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HASTINGS, VIVIEN H 24301 WALDEN CENTER DRIVE BONITA SPRINGS, FL 34134 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition STARKEY, JERRY L Name: Name: FRY, DAVID L 24301 WALDEN CENTER DRIVE 24301 WALDEN CENTER DRIVE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 Title: Title: () Delete DV (X) Change () Addition Name: SCHEIDEMANN, ERNEST Name: PERTCHIK, JONATHAN 24301 WALDEN CENTER DRIVE 24301 WALDEN CENTER DRIVE Address: Address: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: () Delete Title: VS Title: () Change () Addition HASTINGS, VIVIEN N Name: Name: 24301 WALDEN CENTER DRIVE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: VAS () Delete Title: (X) Change () Addition CULLEN, JAMES D DEVENDORF, RUSSELL Name: Name: 24301 WALDEN CENTER DRIVE Address: Address: 24301 WALDEN CENTER DRIVE City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134 Title: Title: () Delete () Change (X) Addition KLINGENSMITH, CRAIG Name: Name: Address: ONE RESERVE ROAD Address: City-St-Zip: City-St-Zip: DANBURY, CT 06810 Title: () Delete Title: () Change (X) Addition TIEBOUT-TOURON, MARCIENNE Name: Name: 24301 WALDEN CENTER DRIVE Address: Address: City-St-Zip: City-St-Zip: BONITA SPRINGS, FL 34134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VIVIEN N. HASTINGS S 04/29/2009