

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P96000084355

Entity Name: WCI REALTY, INC.

**FILED**  
**Nov 03, 2009**  
**Secretary of State****Current Principal Place of Business:**24301 WALDEN CENTER DR.  
SUITE 300  
BONITA SPRINGS, FL 34134**New Principal Place of Business:****Current Mailing Address:**24301 WALDEN CENTER DR.  
SUITE 300  
BONITA SPRINGS, FL 34134**New Mailing Address:**

FEI Number: 59-3408628

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**HASTINGS, VIVIEN N  
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

**OFFICERS AND DIRECTORS:**Title: D/P ( ) Delete  
Name: BARBER, RICHARD  
Address: 24301 WALDEN CENTER DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134Title: VS ( ) Delete  
Name: HASTINGS, VIVIEN N  
Address: 24301 WALDEN CENTER DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134Title: D/V ( ) Delete  
Name: PERTCHIK, JONATHAN  
Address: 24301 WALDEN CENTER DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134Title: V ( ) Delete  
Name: DEVENDORF, RUSSELL  
Address: 24301 WALDEN CENTER DR.  
City-St-Zip: BONITA SPRINGS, FL 34134Title: V ( ) Delete  
Name: GREEN, CHRISTINE M  
Address: 24301 WALDEN CENTER DR.  
City-St-Zip: BONITA SPRINGS, FL 34134Title: V ( ) Delete  
Name: LIGHT, DON F  
Address: 24301 WALDEN CENTER DR.  
City-St-Zip: BONITA SPRINGS, FL 34134**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change ( ) Addition  
Name: KING, ROBERT A  
Address: 24301 WALDEN CENTER DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134Title: D/V (X) Change ( ) Addition  
Name: BARBER, RICHARD W  
Address: 24301 WALDEN CENTER DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: V/S (X) Change ( ) Addition  
Name: HASTINGS, VIVIEN N  
Address: 24301 WALDEN CENTER DR.  
City-St-Zip: BONITA SPRINGS, FL 34134Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

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11/03/2009

Electronic Signature of Signing Officer or Director

Date