

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90236 013 ***150.00

DOCUMENT # P98000007442

1. Entity Name
WCI HOMES, INC.



Principal Place of Business
24301 WALDEN CENTER DR
BONITA SPRINGS, FL 34134 US

Mailing Address
24301 WALDEN CENTER DR
SUITE 300
BONITA SPRINGS, FL 34134

60034067



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04242006

Chg-P

CR2E034 (11/05)

4. FEI Number
59-3557486

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HASTINGS, VIVIEN N
24301 WALDEN CENTER DRIVE
SUITE 300
BONITA SPRINGS, FL 34134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DV ☐ Delete
NAME FRY, DAVID
STREET ADDRESS 24301 WALDEN CENTER DRIVE
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE D ☒ Delete
NAME GREENBERG, MICHAEL
STREET ADDRESS 24301 WALDEN CENTER DRIVE
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE T ☐ Delete
NAME BRASINGTON, CHARLIE
STREET ADDRESS 24301 WALDEN CENTER DRIVE
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE DP ☐ Delete
NAME OAK, TIMOTHY
STREET ADDRESS 24301 WALDEN CENTER DR
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE VS ☐ Delete
NAME HASTINGS, VIVIEN N
STREET ADDRESS 24301 WALDEN CENTER DRIVE
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE V ☐ Delete
NAME ADELMAN, STEVEN C
STREET ADDRESS 24301 WALDEN CENTER DRIVE
CITY-ST-ZIP BONITA SPRINGS, FL 34134

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V/AS ☐ Change ☒ Addition
NAME James-D. Cullen
STREET ADDRESS 24301 Walden Center Drive
CITY-ST-ZIP Bonita Springs, FL 34134

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vivien Hastings Vivien Hastings

Date

Daytime Phone #

4-24-06

239-448-8213