2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003307

Entity Name: WCI COMMUNITIES, INC.

Current Principal Place of Business:

24301 WALDEN CENTER DRIVE BONITA SPRINGS. FL 34134

Current Mailing Address:

24301 WALDEN CENTER DRIVE BONITA SPRINGS. FL 34134

FEI Number: 27-0472098 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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:

Title

Electronic Signature of Registered Agent

Date

FILED Apr 29, 2016

Secretary of State

CC1378983539

Officer/Director Detail :

SVPS

Title Title SVP

BASS, KEITH DEVENDORF, RUSSELL Name Name

24301 WALDEN CENTER DRIVE Address Address 24301 WALDEN CENTER DRIVE City-State-Zip: BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134 City-State-Zip:

Title SVP

Name ERHARDT, PAUL HASTINGS, VIVIEN Name

Address 24301 WALDEN CENTER DRIVE Address 24301 WALDEN CENTER DRIVE BONITA SPRINGS FL 34134 City-State-Zip: City-State-Zip: BONITA SPRINGS FL 34134

Title SVP VΡ Title

Name MCGOLDRICK, JOHN Name FERRY, JOHN

Address 24301 WALDEN CENTER DRIVE Address 24301 WALDEN CIRCLE DRIVE

City-State-Zip: BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134 City-State-Zip:

Title VΡ Title SVP

Name BARBER, RICHARD MESA, REINALDO Name

24301 WALDEN CENTER DRIVE Address 24301 WALDEN CENTER DRIVE Address City-State-Zip: BONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134 City-State-Zip:

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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.

04/29/2016 SIGNATURE: VIVIEN HASTINGS **SVPS**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP Title VP

Name BOWLES, SCOTT Name GREEN, CHRISTINE

Address 24301 WALDEN CENTER DRIVE Address 24301 WALDEN CENTER DRIVE City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

Title VP Title VP, ASSISTANT SECRETARY

Name LEITH, SHEILA Name SWARTZ, NICOLE

Address 24301 WALDEN CENTER DRIVE Address 24301 WALDEN CENTER DRIVE
City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

Title SVP Title SVP

Name IVIN, DAVID Name RAPAPORT, JONATHAN

Address 24301 WALDEN CENTER DRIVE Address 24301 WALDEN CENTER DRIVE

City-State-Zip: BONITA SPRINGS FL 34134

City-State-Zip: BONITA SPRINGS FL 34134