2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004077

Entity Name: MID-AMERICA APARTMENT COMMUNITIES, INC.

FILED Feb 13, 2020 **Secretary of State** 7442196801CC

Current Principal Place of Business:

6815 POPLAR AVE., SUITE 500 GERMANTOWN, TN 38138

Current Mailing Address:

6815 POPLAR AVE., SUITE 500 GERMANTOWN, TN 38138 US

FEI Number: 62-1543819 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 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:

City-State-Zip:

Name

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SVP, SECRETARY, CECO Title CEO

WOLFGANG, LESLIE BOLTON, H. ERIC Name Name

6815 POPLAR AVE., SUITE 500 6815 POPLAR AVE., SUITE 500 Address Address City-State-Zip: **GERMANTOWN TN 38138 GERMANTOWN TN 38138** City-State-Zip:

Title D Title EVP, GENERAL COUNSEL

Name GRAF, ALAN Name DELPRIORE, ROBERT J

Address 6815 POPLAR AVE., SUITE 500 Address 6815 POPLAR AVE., SUITE 500 **GERMANTOWN TN 38138** City-State-Zip: City-State-Zip: **GERMANTOWN TN 38138**

Title DIRECTOR Title **DIRECTOR**

Name MCGURK, MONICA Name LOWDER, JAMES K

Address 6815 POPLAR AVE., SUITE 500 Address 6815 POPLAR AVE., SUITE 500 City-State-Zip: **GERMANTOWN TN 38138 GERMANTOWN TN 38138**

Title DIRECTOR Title DIRECTOR

6815 POPLAR AVE., SUITE 500 Address 6815 POPLAR AVE., SUITE 500 Address City-State-Zip: **GERMANTOWN TN 38138 GERMANTOWN TN 38138** City-State-Zip:

Continues on page 2

Name

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: ROBERT J. DELPRIORE

NORWOOD, PHILIP W.

02/13/2020 EVP, GENERAL COUNSEL

STOCKERT, DAVID P.

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title **DIRECTOR** Title DIRECTOR

Name FRENCH, RUSSELL R Name JENNINGS, TONI

6815 POPLAR AVE., SUITE 500 Address Address 6815 POPLAR AVE., SUITE 500 City-State-Zip: GERMANTOWN TN 38138 City-State-Zip: GERMANTOWN TN 38138

Title Title DIRECTOR DIRECTOR

Name NIELSEN, CLAUDE B. LOWDER, THOMAS H. Name

6815 POPLAR AVE., SUITE 500 Address 6815 POPLAR AVE., SUITE 500 Address GERMANTOWN TN 38138

City-State-Zip: City-State-Zip: GERMANTOWN TN 38138

Title **DIRECTOR** Title **DIRECTOR**

Name SHORB, GARY SANDERS, W. REID Name

Address 6815 POPLAR AVE., SUITE 500 Address 6815 POPLAR AVE., SUITE 500 City-State-Zip: **GERMANTOWN TN 38138** City-State-Zip: GERMANTOWN TN 38138