2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004077

Entity Name: MID-AMERICA APARTMENT COMMUNITIES, INC.

FILED Feb 06, 2019 Secretary of State 5801345813CC

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title SVP, SECRETARY, CECO Title CEO

Name WOLFGANG, LESLIE Name BOLTON, H. ERIC

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

Title EVP, GENERAL COUNSEL Title D

Name DELPRIORE, ROBERT J Name GRAF, ALAN

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

Title DIRECTOR Title DIRECTOR

Name LOWDER, JAMES K Name MCGURK, MONICA

Address 6815 POPLAR AVE., SUITE 500 Address 6815 POPLAR AVE., SUITE 500

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

Title DIRECTOR Title DIRECTOR

Name NORWOOD, PHILIP W. Name STOCKERT, DAVID P.

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

SIGNATURE: ROBERT J. DELPRIORE

EVP, GENERAL COUNSEL 02/06/2019

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