

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 832355

Entity Name: AV HOMES, INC.

Current Principal Place of Business:

8601 N SCOTTSDALE ROAD
SUITE 225
SCOTTSDALE, AZ 85253

Current Mailing Address:

8601 N SCOTTSDALE ROAD
SUITE 225
SCOTTSDALE, AZ 85253 US

FEI Number: 23-1739078

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
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 EVP
Name MULAC, JOSEPH C III
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title SVP, CFO
Name JOHNSTON, TINA M
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title SVP
Name PLONSKI, KENNETH
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title PCEOD
Name CREGG, ROGER A
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title EVPS
Name GOMEZ, DAVE
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title SVP
Name COLGAN, SAM
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title D
Name ANDERSON, ALLEN J
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title D
Name BARNETT, PAUL D
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

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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: DAVE GOMEZ

EVPS

04/29/2013

Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title D
Name EINIGER, ROGER W
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title DCOB
Name NASH, JOSHUA
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title D
Name LEIBOWITZ, REUBEN S
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253

Title D
Name SIMON, JOEL M
Address 8601 N SCOTTSDALE ROAD
SUITE 225
City-State-Zip: SCOTTSDALE AZ 85253