

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 765895

1. Entry Name

LEGION VILLAGE TOWNHOMES HOMEOWNERS ASSOCIATION

07-17-2000 90001 022 ****70.00
765895

FILED

00 JUL 21 AM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 734 LEGION DRIVE DESTIN FL 32541	Mailing Address 734 LEGION DRIVE DESTIN FL 32541-0257
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FBI Number 28-6140959	Applied For Not Applicable
Zip	Country	Zip	Country

5. Name and Address of Current Registered Agent
CARPENTER, KELLY T.
 734 LEGION DR
 #63
 DESTIN FL 32541

7. Name and Address of New Registered Agent
 Name: **BONNIE C. CARTER**
 Street Address (P.O. Box Number is Not Acceptable):
734 LEGION DRIVE-HOA OFFICE
 City: **DESTIN** FL Zip Code: **32541**

8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE: **Bonnie C. Carter - CAM 002294** 06/29/00
Signature, name or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing) DATE

FILE NUMBER FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BROWN, TODD D. 630 HWY 98 E DESTIN FL 32541 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP POSTON, RODNEY 734 LEGION DR #67 DESTIN FL 32541 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAULA BROWN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 184 S. HOLIDAY ROAD DESTIN FL 32541 (DIRECTOR)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BROWN, HEATHER M. T. 734 LEGION DR #0 DESTIN FL 32541 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PEGGY O'BANNON <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 344 L'ATRIUM DRIVE (DIRECTOR) DESTIN FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC OZACK, PAUL 734 LEGION DR #20 DESTIN FL 32541 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JASON HENSLEY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 734 LEGION DRIVE #01 (DIRECTOR) DESTIN FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CARPENTER, KELLY T. 734 LEGION DR #63 DESTIN FL 32541 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CAROLINA HANLON <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 734 LEGION DR #06 (SECRETARY) DESTIN FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIDD, BETH 734 LEGION DR #62 DESTIN FL 32541 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ELIZABETH A. KIDD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 734 LEGION DR #45 (TREASURER) DESTIN FL 32541

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, 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.

Bonnie C. Carter 06/29/00
 → Amended

7/21