

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 765895

FILED  
Oct 30, 2008  
Secretary of State

Entity Name: LEGION VILLAGE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

734 LEGION DRIVE  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

734 LEGION DRIVE  
DESTIN, FL 32541

**New Mailing Address:**

FEI Number: 26-6446959      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MURPHY, JIM  
734 LEGION DRIVE  
DESTIN, FL 32541      US

**Name and Address of New Registered Agent:**

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: JIM MURPHY

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: MURPHY, JIM  
Address: 734 LEGION DR #44  
City-St-Zip: DESTIN, FL 32541

Title: T      ( ) Delete  
Name: ADAMSON, JEFF  
Address: 151 REGIONS WAY, STE 4-A  
City-St-Zip: DESTIN, FL 32541

Title: S      ( ) Delete  
Name: MANESS, LOIS  
Address: 734 LEGION DRIVE UNIT #46  
City-St-Zip: DESTIN, FL 32541

Title: VP      ( ) Delete  
Name: FARR, SANDI  
Address: 734 REGION DRIVE, UNIT 91  
City-St-Zip: DESTIN, FL 32541

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: MURPHY, JIM  
Address: 734 LEGION DR #44  
City-St-Zip: DESTIN, FL 32541 US

Title: T      (X) Change ( ) Addition  
Name: ADAMSON, JEFF  
Address: 151 REGIONS WAY, STE 4-A  
City-St-Zip: DESTIN, FL 32541 US

Title: S      (X) Change ( ) Addition  
Name: RAUS, GENE  
Address: 422 BAYWINDS DR  
City-St-Zip: DESTIN, FL 32541 US

Title: VP      (X) Change ( ) Addition  
Name: OSMIRA, TOURELLE  
Address: 734 LEGION DRIVE #6  
City-St-Zip: DESTIN, FL 32541 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM MURPHY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

10/30/2008

\_\_\_\_\_  
Date