

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Aug 31, 2007  
Secretary of State**

DOCUMENT# N06000001198

Entity Name: LEGACY PARC CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1880 DESTINY BLVD.  
KISSIMMEE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

1880 DESTINY BLVD.  
KISSIMMEE, FL 32202

**New Mailing Address:**

FEI Number: 20-4345982      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:**

KANTOR, JOSEPH  
6000 METRO WEST BLVD., STE. 105  
ORLANDO, FL 32835 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: KANTOR, JOSEPH  
Address: 6000 METRO WEST BLVD., STE. 105  
City-St-Zip: ORLANDO, FL 32835

Title: DVT ( ) Delete  
Name: ORDEN, CHARLES  
Address: 315 E. ROBINSON ST., STE. 450  
City-St-Zip: ORLANDO, FL 32801

Title: DS ( ) Delete  
Name: INOCHOVSKY, ROMAN  
Address: 5655 CARDER RD.  
City-St-Zip: ORLANDO, FL 32810

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSEPH KANTOR

Electronic Signature of Signing Officer or Director

P/D

08/31/2007

Date