

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 05, 2009
Secretary of State**

DOCUMENT# N08000007208

Entity Name: PBG LEGENDS COMMERCIAL PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

% NASON, YEAGER, GERSON, WHITE & LIOCE, PA
1645 PALM BEACH LAKES BOULEVARD, #1200
WEST PALM BEACH, FL 33401

New Principal Place of Business:

C/O JAMES BROWN PA
1110 N. OLIVE AVENUE
WEST PALM BEACH, FL 33401

Current Mailing Address:

% NASON, YEAGER, GERSON, WHITE & LIOCE, PA
1645 PALM BEACH LAKES BOULEVARD, #1200
WEST PALM BEACH, FL 33401

New Mailing Address:

C/O JAMES BROWN PA
1110 N. OLIVE AVENUE
WEST PALM BEACH, FL 33401

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

ARMOUR, ALAN I ESQUIRE
1645 PALM BEACH LAKES BOULEVARD
SUITE 1200
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

BROWN, JAMES N ESQUIRE
1110 N. OLIVE AVENUE
WEST PALM BEACH, FL 33401 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: JAMES N. BROWN

11/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: BROWN, JAMES N
Address: 1110 N. OLIVE AVENUE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Change (X) Addition
Name: LEVY, ROB
Address: 5801 CONGRESS AVENUE, STE 200
City-St-Zip: BOCA RATON, FL 33487

Title: D () Change (X) Addition
Name: WEST, BRIAN
Address: 3125 SW MAPP ROAD
City-St-Zip: PALM CITY, FL 34990

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: JAMES N. BROWN

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11/05/2009

Electronic Signature of Signing Officer or Director

Date